



STATE OF TENNESSEE
Tre Hargett, Secretary of State
Division of Business Services
William R. Snodgrass Tower
312 Rosa L. Parks AVE, 6th FL
Nashville, TN 37243-1102

Neuropsychology Consultants, PLLC

October 28, 2010

4219 Hillsboro Pike
Suite 203
Nashville, TN 37215 USA

Filing Acknowledgment

Please review the filing information below and notify our office immediately of any discrepancies.

Control # :	643324	Formation Locale:	Davidson County
Filing Type:	Limited Liability Company - Domestic	Date Formed:	10/28/2010
Filing Date:	10/28/2010 10:23 AM	Fiscal Year Close	12
Status:	Active	Annual Rpt Due:	04/01/2011
Duration Term:	Perpetual	Image # :	6788-0438
Business Type:	Professional Limited Liability Company		
Managed By:	Member Managed		

Document Receipt

Receipt # : 270764	Filing Fee:	\$300.00
Payment-Check/MO - JAMES S. WALKER, PHD, NASHVILLE, TN		\$300.00

Registered Agent Address

James S. Walker
812 Lealand Court
Nashville, TN 37204 USA

Congratulations on the successful filing of your **Articles of Organization** for **Neuropsychology Consultants, PLLC** in the State of Tennessee which is effective on the date shown above. You must also file this document in the office of the Register of Deeds in the county where the entity has its principal office if such principal office is in Tennessee.

You must file an Annual Report with this office on or before the Annual Report Due Date noted above and maintain a Registered Office and Registered Agent. Failure to do so will subject the business to Administrative Dissolution/Revocation.

Tre Hargett, Secretary of State
Business Services Division

Processed By: Susan Anderson

State of Tennessee



Department of State
Corporate Filings
312 Eighth Avenue North
6th Floor, William R. Snodgrass Tower
Nashville, TN 37243

ARTICLES OF ORGANIZATION
(LIMITED LIABILITY COMPANY)

(For use on or after 7/1/2006)

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2010 OCT 28 AM 10:23
THE HARGETT
SECRETARY OF STATE

The Articles of Organization presented herein are adopted in accordance with the provisions of the Tennessee Revised Limited Liability Company Act.

1. The name of the Limited Liability Company is: Neuropsychology Consultants, PLLC

(NOTE: Pursuant to the provisions of TCA §48-249-106, each limited Liability Company name must contain the words "Limited Liability Company" or the abbreviation "LLC" or "L.L.C.")

2. The name and complete address of the Limited Liability Company's initial registered agent and office located in the state of Tennessee is:

James S. Walker

(Name)

812 Lealand Court

Nashville

TN 37204

(Street address)

(City)

(State/Zip Code)

Davidson

(County)

3. The Limited Liability Company will be: (NOTE: PLEASE MARK APPLICABLE BOX)

☒ Member Managed

☐ Manager Managed

☐ Director Managed

4. Number of Members at the date of filing, if more than six (6): 1

5. If the document is not to be effective upon filing by the Secretary of State, the delayed effective date and time is: (Not to exceed 90 days)

Date: _____, _____ Time: _____

6. The complete address of the Limited Liability Company's principal executive office is:

4219 Hillsboro Pike, Suite 203

Nashville

TN 37215

(Street Address)

(City)

(State/County/Zip Code)

7. Period of Duration if not perpetual: _____

8. Other Provisions: See Attached

9. THIS COMPANY IS A NONPROFIT LIMITED LIABILITY COMPANY (Check if applicable) ☐

October 26, 2010

Signature Date

Principal

Signer's Capacity (if other than individual capacity)

James S. Walker
Signature

James S. Walker

Name (printed or typed)

ARTICLES OF ORGANIZATION – FORM 4270

7. OTHER PROVISIONS –

Purpose of business activities will be to provide professional forensic and neuropsychological testing, evaluations, and reporting thereof. Professional service organization will have one or more persons as members and will have no disqualified members.

6788.0439

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