

PO0000039481

TRANSMITTAL LETTER

Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

600003209196--3
-04/14/00-01043-008
*****78.75 *****78.75

SUBJECT: West Psychiatric Associates, P.A.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

\$70.00
Filing Fee

\$78.75
Filing Fee
& Certificate of Status

\$78.75
Filing Fee
& Certified Copy

\$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: Sayonara Baez, MD
Name (Printed or typed)

10011 Pines Blvd. Suite 203D
Address

Pembroke Pines, FL 3302
City, State & Zip

954-447-0787
Daytime Telephone number

00 APR 14 AM 9:09
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

NOTE: Please provide the original and one copy of the articles.

† BROWN APR 20 2000

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

West Psychiatric Associates, P.A.

FILED
00 APR 14 AM 9:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/ mailing address is:

10011 Pines Blvd Suite 203D
Pembroke Pines, FL 33024

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

in engaging in any activities or business permitted under the laws of the United States and the State of Florida.

This includes but is not limited to mental health services

ARTICLE IV SHARES

The number of shares of stock is:

1000 shares of common stocks at \$1.00 par value common stock, which shall be designated "common shares"

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

This corporation shall have one (1) director initially. This number may be either increased or diminished from time to time by the By-Laws.
The name and address of the initial director is
Sayonara Baez, MD

ARTICLE VI REGISTERED AGENT

The name and Florida street address registered agent is:

Sayonara Baez, MD
13282 NW 18ST
Pembroke Pines, FL 33028

ARTICLE VII INCORPORATOR

The name and address of the incorporator is:

Sayonara Baez, MD
13282 NW 18ST
Pembroke Pines, FL 33028

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Sayonara Baez, MD
Signature/Registered Agent

04/11/00
Date

Sayonara Baez, MD
Signature/Incorporator

04/11/00
Date