P03000010193

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

800010374748

01/21/03--01054--005 **78.75

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
03 JAN 21 PM 2:35

JAN 2

Healthcare
FACILITATORS

January 17, 2003

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

Dear Division of Corporations:

Healthcare Facilitators has been requested by Adriana Morales PsyD, A Possible Life Inc, to submit the attached Articles of Incorporation and payment for incorporation.

If you have any questions, please contact my office.

Thank you.

Sincerely,

Fran LaVallette
Facilitator

820 Grovesmere Loop • Ocoee, Florida 34761
Office: (407) 654-2284 • **Fax: (407) 877-9944** • email: info@hcf.net
Web Site: www.hcf.net

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
03 JAN 21 PM 2:36

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:

A Possible Life Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

7300 Sandlake Commons Blvd
Complex A Suite 112
Orlando, Florida 32819

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Medical practice specializing in psychotherapy and life success coaching

ARTICLE IV SHARES

The number of shares of stock is:

1000 shares

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

Adriana Morales PsyD, LMHC
14695 Braddock Oak Drive
Orlando, Florida 32837

ARTICLE VI REGISTERED AGENT

The **name and Florida street address** of the registered agent is:

Adriana Morales PsyD, LMHC
14695 Braddock Oak Drive
Orlando, Florida 32837

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Adriana Morales PsyD, LMHC
14695 Braddock Oak Drive
Orlando, Florida 32837

****

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

Signature/Registered Agent — Date: 1/6/03

Signature/Incorporator — Date: 1/06/03