

P05000019878

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

(Business Entity Name)

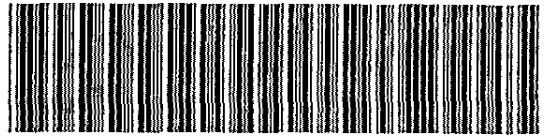
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05 FEB -2 PM 2:19  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**TRANSMITTAL LETTER**

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

**SUBJECT:** AMaysing Counseling Services Inc  
**(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)**

Enclosed are 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

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input checked="" type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
<b>ADDITIONAL COPY REQUIRED</b>	

**FROM:** Michael D. Mays  
Name (Printed or typed)

18122 Sandy Pointe Dr.  
Address

Tampa, FL 33647  
City, State & Zip

(813)765-4770  
Daytime Telephone number

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

**ARTICLES OF INCORPORATION**

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

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**ARTICLE I NAME**

The name of the corporation shall be:

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

AMaysing Counseling Services Inc.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/ mailing address is:

18122 Sandy Pointe Dr.  
Tampa, FL 33647

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Counseling Services

**ARTICLE IV SHARES**

The number of shares of stock is:

3

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

List name(s), address(es) and specific title(s):

Dora B. Mays  
18122 Sandy Pointe Dr.  
Tampa, FL 33647  
Director

Michael D. Mays  
Same Address  
Assistant Director

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Michael D. Mays  
18122 Sandy Pointe Dr.  
Tampa, FL 33647

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Michael D. Mays  
18122 Sandy Pointe Dr.  
Tampa, FL 33647

\*\*\*\*\*  
*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*

Michael D. Mays  
Signature/Registered Agent

31 Jan 05  
Date

Michael D. Mays  
Signature/Incorporator

31 Jan 05  
Date