

P08000042749

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

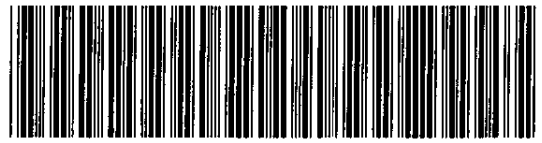
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

W080000042076



700115753577

01/28/08--01053--020 **87.50

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
08 APR 28 AM 11:48

SP/29/08

COVER LETTER

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

SUBJECT: Stephaine May PsyD, 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

\$78.75
Filing Fee
& Certified Copy

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

ADDITIONAL COPY REQUIRED

FROM: Stephaine May PsyD

Name (Printed or typed)

1900 NW Corporate Blvd suite 225

Address

Boca Raton, FL 33431

City, State & Zip

Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 29, 2008

STEPHAINE MAY PSYD
1900 NW CORPORATE BLVD SUITE 225 -W
BOCA RATON, FL 33431

SUBJECT: STEPHAINE MAY PSYD, INC.
Ref. Number: W08000004906

We have received your document for STEPHAINE MAY PSYD, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

A corporation may not serve as its own registered agent. Please designate an individual or another active entity filed or registered with this office, having a Florida street address.

The registered agent must sign accepting the designation.

A corporation may not act as its own incorporator. Please designate an individual, another active domestic or foreign corporation, with a street address.

The person designated as incorporator in the document and the person signing as incorporator must be the same.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6062.

Eula Peterson
Regulatory Specialist II
New Filing Section

Letter Number: 808A00006036



RECEIVED

08 APR 28 AM 8:00

FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 7, 2008

STEPHAINE MAY PSYD ***2nd mailing***
1900 NW CORPORATE BLVD.
suite 225-W
BOCA RATON, FL 33431

SUBJECT: STEPHAINE MAY PSYD,INC.
Ref. Number: W08000004906

We have received your document for STEPHAINE MAY PSYD,INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

A corporation may not serve as its own registered agent. Please designate an individual or another active entity filed or registered with this office, having a Florida street address.

The registered agent must sign accepting the designation.

A corporation may not act as its own incorporator. Please designate an individual, another active domestic or foreign corporation, with a street address.

The person designated as incorporator in the document and the person signing as incorporator must be the same.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6062.

Eula Peterson
Regulatory Specialist II
New Filing Section

Letter Number: 808A00006036

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:

Stephaine May PsyD, Inc.

Stephanie May PsyD, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:
1900 NW Corporate Blvd suite # 225 W
Boca Raton, FL 33431

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
Profit

ARTICLE IV SHARES

The number of shares of stock is:
100 (one hundred)

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Stephaine May
1900 NW Corporate Blvd suite # 225 W
Boca Raton 33431

FILED OF STATE
SECRETARY OF CORPORATIONS
08 APR 28 AM 11:48

ARTICLE VI REGISTERED AGENT

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

Stephaine May
1900 NW Corporate Blvd suite # 225
Boca Raton 33431

ARTICLE VII INCORPORATOR

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

Stephaine May
1900 NW Corporate Blvd suite # 225
Boca Raton 33431

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

✓ Stephaine May
Signature/Registered Agent

✓ 4/21/08
Date

✓ S May
Signature/Incorporator

✓ 1/21/08
Date

FILED
SECRETARY OF CORPORATIONS
DIVISION OF CORPORATIONS
08 APR 29 AM 11:48