

# P190000074192

Division of Corporations

## Florida Department of State Division of Corporations Electronic Filing Cover Sheet

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To: Division of Corporations  
Fax Number : (850)617-6381

From: Account Name : FLORIDA MULTISERVICES, INC.  
Account Number : I20150000061  
Phone : (786)290-3319  
Fax Number : (305)645-2035

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: flmultiservices@yahoo.com

### FLORIDA PROFIT/NON PROFIT CORPORATION ALONSO'S BEHAVIOR CONSULTING, CORP.

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$70.00

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Corporate Filing Menu

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**COVER LETTER**

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

**SUBJECT:** ALONSO'S BEHAVIOR CONSULTING, CORP.  
(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:** LEIDY L. ALONSO  
Name (Printed or typed)  
600 NW 6TH STREET APT 1407  
Address  
MIAMI, FL 33136  
City, State & Zip  
786-409-9828  
Daytime Telephone number  
FLMULTISERVICES@YAHOO.COM  
E-mail address: (to be used for future annual report notification)

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

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

**ARTICLE I NAME** ALONSO'S BEHAVIOR CONSULTING, CORP.  
The name of the corporation shall be: \_\_\_\_\_

**ARTICLE II PRINCIPAL OFFICE**  
Principal street address Mailing address, if different is:  
600 NW 6TH STREET SAME  
APT. 1407  
MIAMI, FL 33136

**ARTICLE III PURPOSE** ANY AND ALL LAWFUL BUSINESS  
The purpose for which the corporation is organized is: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**ARTICLE IV SHARES** ONE HUNDRED SHARES NO PAR VALUE  
The number of shares of stock is: \_\_\_\_\_

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

Name and Title: LEIDY L. ALONSO, PDTS Name and Title: \_\_\_\_\_  
Address 600 NW 6TH STREET Address: \_\_\_\_\_  
APT. 1407  
MIAMI, FL 33136

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_  
Address \_\_\_\_\_ Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_  
Address \_\_\_\_\_ Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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Name and Title: _____	Name and Title: _____
Address _____	Address: _____
_____	_____
_____	_____

**ARTICLE VI REGISTERED AGENT**

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

Name: LEIDY L. ALONSO

Address: 600 NW 6TH STREET APT 1407

MIAMI, FL 33136

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: LEIDY L. ALONSO

Address: 600 NW 6TH STREET APT 1407

MIAMI, FL 33136

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**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: 10/02/2019. (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

*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*

<u>Leidy L. Alonso</u>	<u>10/02/2019</u>
Required Signature/Registered Agent	Date

*I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.*

<u>Leidy L. Alonso</u>	<u>10/02/2019</u>
Required Signature/Incorporator	Date

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ALONSO'S BEHAVIOR CONSULTING, CORP.  
600 NW 6<sup>TH</sup> STREET APT. 1407  
MIAMI, FL 33136  
Phone: 786-409-9828

October 2, 2019

FLORIDA DEPARTMENT OF STATE

Attention: New Filings Section

TO WHOM IT MAY CONCERN:

This is to advise you that the owner of ALONSO'S BEHAVIOR CONSULTING, CORP., Document No. P17000034748 is the same owner of the attached articles of incorporation. I have dissolved the company on September 27, 2019 and have no intent of reopening it.

Thank you for your help in this matter,

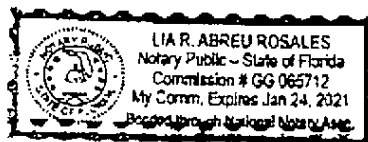
Sincerely yours,

*Leidy L. Alonso*  
Leidy L. Alonso

STATE OF FLORIDA )  
COUNTY OF MIAMI-DADE )

BEFORE ME, the undersigned authority, on October 2, 2019, appeared LEIDY L. ALONSO, who is personally known to me, and acknowledged that she executed the foregoing instrument for the purposes expressed therein.

*[Signature]*  
LIA R. ABREU ROSALES, NOTARY PUBLIC, State of Florida



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