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Division of Corporations

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(((H240002704143)))



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FOREIGN PROFIT/NONPROFIT CORPORATION

SOUTH SHORE COUNSELING AND PSYCHOLOGICAL SERVICES. P.C., CORP.

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Certificate of Status	0
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THE GOOD STANDING 8/12/2024



August 22, 2024

FLORIDA DEPARTMENT OF STATE Division of Corporations

INTERSTATE FILINGS LLC

SUBJECT: SOUTH SHORE COUNSELING AND PSYCHOLOGICAL SERVICES, P.C., CORP

REF: W24000119057

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return 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) 245-6051.

Tracy L Lemieux

FAX Aud. #: H24000270414 Regulatory Specialist II Letter Number: 824A00018816 850-617-6381

8/19/2024 4:49:21 PM PAGE 1/001 Fax Server



August 19, 2024

FLORIDA DEPARTMENT OF STATE Division of Corporations

INTERSTATE FILINGS LLC

SUBJECT: SOUTH SHORE COUNSELING AND PSYCHOLOGICAL SERVICES, P.C., PA

REF: W24000117050

We have received your document for SOUTH SHORE COUNSELING AND PSYCHOLOGICAL SERVICES, P.C., PA and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

Florida law does not provide for the recognition of a foreign professional corporation. An acceptable corporate suffix will need to be added to your entity name for this Department to accept and file your document.

Please return 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) 245-6051.

Corey Pettway Regulatory Specialist II

FAX Aud. #: H24000270414 Letter Number: 524A00018478 Τo.

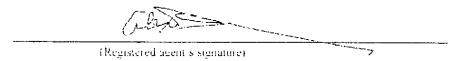
(((H24000270414-3)))

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FORFIGN CORPORATION TO TRANSACT RUSINESS IN THE STATE OF FLORIDA

corporation, must include "INCORPORAT" lorp," "Inc." "Co." or "Corp.")	EĐ,	" "COMPANY," "CORPORATION,"	
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	add	10381	
AND PSYCHOLOGICAL SERVICES			
s) of corporation authorized in home state is	l Çt	unter to be carried out in state of Florida)	
et address of Florida registered agent; (h c	Box <u>NOF</u> acceptable)	2U.Z
INTERSTATE AGENT SERVICES, I	JLC		Zužk AUG
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(Cith)	•	(Zip code)	::.
gent's acceptance:			29
	corporation, must include "INCORPORAT loop," "The " "Co " or "Corp.") Lible in Floridal enter alternate corporate in under the law of which it is incorporated? (Date first transacted busine (SEE SECTIONS 607-1561 & 60 EEE SECTIONS 607-1561 & 60 EEE AVE SUITE 207 (Principal office of Current mailing AND PSYCHOLOGICAL SERVICES and registered agent; (INTERSTATE AGENT SERVICES, 100 SE 2ND STREET, SUITE 2000 and MIAMI (City)	Corp." The ""Co" or "Corp." Lable in Floridal enter alternate corporate name under the law of which it is incorporated) (Date first transacted business in (SEE SECTIONS 607-1501 & 607-15). EM AVE SUITE 207 (Principal office addity of corporation authorized in home state or coefficiency of corporation authorized in home state or coefficiency of the state of	Lible in Floridal enter alternate corporate name adopted for the purpose of transacting business of independent in the interspondent of the purpose of transacting business in coder the law of which it is incorporated) [SPERPETUAL] (Duration: You corp. will cease to exist in "potential first transacted business in Floridal it prior to registration) (SEE SECTIONS 607-1501 & 607-1502, F.S., to determine penalty liability) EM AVE SUITE 207 (Principal office address) Y 11793 (Current mailing address) AND PSYCHOLOGICAL SERVICES (Of corporation authorized in home state or country to be carried out in state of Floridal) Enaddress of Floridal registered agent: (P.O. Box. NOT acceptable) INTERSTATE AGENT SERVICES, LLC 100 SE 2ND STREET, SUITE 2000 #209 MIAMI (City) Floridal 33131 (Zip code)

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application. Thereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.



^{11.} Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated

To

(((H24000270414.3)))

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STATE OF NEW YORK

DEPARTMENT OF STATE

Certificate of Status

1, WALTER T. MOSLEY, Secretary of State of the State of New York and custodian of the records required by law to be filed in my office, do hereby certify that upon a diligent examination of the records of the Department of State, as of the date and time of this certificate, the following entity information is reflected:

SOUTH SHORE COUNSELING AND PSYCHOLOGICAL SERVICE

Entity Name: S, P.C.

DOS ID Number: 1502949

Entity Type: DOMESTIC PROFESSIONAL SERVICE CORPORATION

Entity Status: EXISTING Date of Initial Filing with DOS: 01/18/1991Statement Status: CURRENT

Statement Due Date: 01/31/2025

I certify that the following is a list of documents on file in the Department of State for said entity:

Document Type: CERTIFICATE OF INCORPORATION

Date of Filing: 01/18/1991

Entity Name: SOUTH SHORE COUNSELING AND PSYCHOLOGICAL SERVICES, P.C.

Document Type: BIENNIAL STATEMENT

Date of Filing: 04/08/1993 Effective Date: 01/01/1993

Document Type: BIENNIAL STATEMENT

Date of Filing: 03/15/1994

Effective Date: 01/01/1994

To:

Document Type: BIENNIAL STATEMENT Date of Filing: 04/22/1997 Effective Date: 01/01/1997 Document Type: BIENNIAL STATEMENT Date of Filing: 01/25/1999 Effective Date: 01/01/1999 Document Type: BIENNIAL STATEMENT Date of Filing: -01/16/2001Effective Date: 01/01/2001 Document Type: BIENNIAL STATEMENT Date of Filing: 01/16/2003 Effective Date: 01/01/2003 BIENNIAL STATEMENT Document Type: Date of Filing: 02/23/2005 Effective Date: 01/01/2005 Document Type: BIENNIAL STATEMENT Date of Filing: 12/27/2006 Effective Date: 01/01/2007 Document Type: CERTIFICATE OF CHANGE Date of Filing: 07/14/2020 Document Type: BIENNIAL STATEMENT Date of Filing: 03/17/2022 Effective Date: 01/01/2021 Document Type: BIENNIAL STATEMENT Date of Filing: 01/30/2023 Effective Date: 01/01/2023

Τo

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Above space is left blank intentionally.

No information is available from this office regarding the financial condition, business activity or practices of this entity.



WITNESS my hand and official seal of the Department of State, at the City of Albany, on August 12, 2024 at 04:01 P.M.

WALTER T. MOSLEY Secretary of State

Brandon Co Heglas

BRENDAN C. HUGHES Executive Deputy Secretary of State

Authentication Number: 100006401999 To Verify the authenticity of this document you may access the Division of Corporation's Document Authentication Website at http://ecorp.dos.ny.gov

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