# V110000101616

(Requestor's Name)						
(Address)						
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(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
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2011 NOV 10 PM 4: 49

11/14/11

# **COVER LETTER**

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

SUBJECT:	LASTING F	AMILIES, 11				
Enclosed is an original a	nd one (1) copy of the Artic	les of Incorporation an	d a check for:	]		
Filing Fee	Filing Fee & Certificate of Status	Filing Fee & Certified Copy	Filing Fee, Certified Copy & Certificate			
		ADDITIONAL C	OPY REQUIRED			
FROM:	SHERYL A. FE	RCHUSN, PSY of	<u> </u>	2011 NOV 10 PM	NOISIAIC LACACA	
300 S. PINE ISLAND RD, #213						
PLANTATION FLORIDA 33324 city, State & Zip (954) 476-0255						
(9S4) 476 - OLS5  Daytime Telephone number						
	drsherylfer	gusona bel	lsouth net			

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

E-mail address: (to be used for future annual report notification)



## FLORIDA DEPARTMENT OF STATE **Division of Corporations**

November 8, 2011

SHERYL A. FERGUSON, PSY.D. 300 S. PINE ISLAND ROAD **SUITE #213** PLANTATION, FL 33324

SUBJECT: LASTING FAMILIES, INC.

Ref. Number: W11000056956

We have received your document for LASTING FAMILIES, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document is illegible and not acceptable for imaging. We ask that you type or carefully print the information in the appropriate blocks.

If your business entity does not intend to transact business until January 1st of the upcoming calendar year, you may wish to revise your document to include an effective date of January 1st. If you do not list an effective date of January 1st, your business entity will become effective this calendar year and it will be required to file an annual report and pay the required annual report fee for the upcoming calendar year this coming January, which is merely weeks away. By listing an effective date of January 1st, the entity's existence will not begin until January 1st of the upcoming year and will, therefore, postpone the entity's requirement to file an annual report and pay the required annual report filing fee until the following calendar year.

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) 245-6973.

Claretha Golden Regulatory Specialist II New Filing Section

Letter Number: 111A00025391



### FLORIDA DEPARTMENT OF STATE Division of Corporations

April 19, 2011

SHERYL A. FERGUSON, PSY.D. 300 S. PINE ISLAND ROAD #213 PLANTATION, FL 33324

SUBJECT: LASTING FAMILIES, INC.

Ref. Number: W11000021901

We have received your document for LASTING FAMILIES, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 617.0202(d), Florida Statutes, requires the manner in which directors are elected or appointed be contained in the articles of incorporation or a statement that the method of election of directors is as stated in the bylaws.

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) 245-6973.

Claretha Golden Regulatory Specialist II New Filing Section

Letter Number: 911A00009480

STORE TARY THE MATTER

ARTICLES OF INCORPORATION
In compliance with Chapter 617, F.S., (Not for Profit)

	in compliance with Chap	ter 617, F.S., (Not for Pro	m)	1.
ARTICLE I NAME  The name of the corporation shall be:	LASTING FAI	MILIES, INC	SECRETARY SURISION OF CON	OF SHARE
ARTICLE II PRINCIPAL OF Principal OF SUITE FORT	A VIEW DLIVE		2011 NOV 10 Mailing address, if different is:	PM 4: 49
INCLUDING WHIS TO INCEPEST OF THE ARTICLE IV MANNER OF E	ENHANCE CO CHILD CLECTION The manner in E SELECTED CERS AND/OR DIRECTOR	THE PARENTING REING Which the directors are ele BY THE PLE DRS	ESIDENT	VG T
<u> </u>	TER CALCON, PRE ANY IEW DRIVE DERNALE, FL. 3	Address:	N/4	· · ·
Name and Title: MA		Name and Title: ^Address:	1/4	
ARTICLE VI REGISTERED A The name and Florida street address: Name: SHEEY Address: JOYO	P.O. Box NOT acceptable) of FERCALS	- Jiv		
Cult-	DR BHUTEN DE SIF HIDERDAIE, FIDE	<del>-</del> 		
Having been named as registered age certificate, I am familiar with and acce	nt to accept service of procept the appointment as register	ess for the above stated co red agent and agree to act		
Required Sig	gnature of Registered Agent		11 10 - 11 Date	
I submit this document and affirm that to the Department of State constitutes a			alse information submitted in a document	
Require	ed Signature of Incorporator	<del>-</del>	11 - 10 - 11 Date	
			<del>-</del>	