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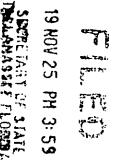
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PICK-UP	MAIT	MAIL
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Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	
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COVER LETTER

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

Wizard Tim	e Emotional And Behavioral I						
	(PROPOSED CORPORATE NAME – <u>MUST INCLUDE SUFFIX</u>)						
Enclosed is an original a	and one (1) copy of the Arti	cles of Incorporation and	a check for:				
\$70.00	□ \$ 78.75	\$78.75	■ \$87.50				
Filing Fee	Filing Fee &		Filing Fee,				
	Certificate of Status	& Certified Copy	Certified Copy & Certificate				
		ADDITIONAL CO	PY REQUIRED				
	Yolanda Colon						
FROM:							
	1618 NE 205th Terrace	71					
Address							
	Miami, FL 33179						
	City, State & Zip						
	561-756-4369						

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

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

Daytime Telephone number

annejolieunltd@aol.com

ARTICLES OF INCORPORATION

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

<u>ARTICLE II</u>	PRINCIPAL OFFICE				•	
161	Principal <u>street</u> address: 18 NE 205th Terrace, Miami FL 33169	161	Mailing address, if different is 8 NE 205th Terrace, Miami, FL 3			
Structured as an after-	for which the corporation is organized is: Fitness Corporation is organized and s school program, troubled juveniles cou	shall be operated ex	d emotional and behavioral disor	rders tho	ugh	es
	nal Revenue Code. The specific purpo		4444			.—
	provided in the after-school programs, s					
•		<u> </u>	·	<u> </u>		
whilst main	taining a students and adolescents pos	sitively involved thro	ough counseling and appropriate	schedule	ed activ	vities.
ARTICLE II	V MANNER OF ELECTION The ma	unner in which the dire	Asn	schedule per by lav	919 NOV 25 P	vities.
	/ MANNER OF ELECTION The ma	unner in which the dire	As p ctors are elected and appointed:	Description of the second of t	\$19 NOV 25	A STATE OF THE STA
ARTICLE II	/ MANNER OF ELECTION The ma	unner in which the dire	As p ctors are elected and appointed:	-	919 NOV 25 PH	The same of the sa
ARTICLE IN	MANNER OF ELECTION _ The ma INITIAL OFFICERS AND/OR DIRE President - Yolanda Colon	cCTORS Name and Title	ctors are elected and appointed: As p	Description of the second of t	#19 NOV 25 PH 3: 5	The same of the sa
ARTICLE IV ARTICLE V Name and Ti Address	MANNER OF ELECTION The ma INITIAL OFFICERS AND/OR DIRE President - Yolanda Colon 1618 NE 205th Terrace Miami, FL 33179 Secretary - Francisco Palacios	ECTORS Name and Title Address:	Treasurer - Nelgica D Guzman 1803 N 68th Ave Hollywood FL 33024	DELOCATION STATE	#19 NOV 25 PH 3: 5	(MESTA)
ARTICLE IN	MANNER OF ELECTION The ma INITIAL OFFICERS AND/OR DIRE President - Yolanda Colon 1618 NE 205th Terrace Miami, FL 33179 Secretary - Francisco Palacios	CCTORS Name and Title Address: Name and Title	As potential and appointed: Treasurer - Nelgica D Guzman 1803 N 68th Ave	DELOCATION STATE	#19 NOV 25 PH 3: 5	A STATE OF THE STA
ARTICLE IV ARTICLE V Name and Ti Address	MANNER OF ELECTION The man INITIAL OFFICERS AND/OR DIRE President - Yolanda Colon 1618 NE 205th Terrace Miami, FL 33179 Secretary - Francisco Palacios	ECTORS Name and Title Address:	Treasurer - Nelgica D Guzman 1803 N 68th Ave Hollywood FL 33024	DELOCATION STATE	#19 NOV 25 PH 3: 5	The same of the sa
ARTICLE IV ARTICLE V Name and Ti Address Name and Ti Address	MANNER OF ELECTION _ The man	Name and Title Address: Name and Title Address:	Treasurer - Nelgica D Guzman 1803 N 68th Ave Hollywood FL 33024	Description of STATE	#19 NOV 25 PH 3: 5	The same of the sa

Name and Title:_		Name and Title:			
Address		Address:	 	_	
				_	
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Name and Title:_		Name and Title:		_	
Address _		Address:			
_				-	
-				_	
ARTIÇLE VI	REGISTERED AGENT				
	orida street address (P.O. Box NOT accept		nt is:		
Name:	Finance Service Expert	S			
Address:	1803 N 68th Ave				
	Hollywood FL 33024	<u> </u>	•	19 X	
				KAN NO	عصصت =
	INCORPORATOR			15.4 17.4 1.4 1.4 1.4 1.4 1.4 1.4 1.4 1.4 1.4 1	u 1
i ne <u>name ano ac</u>	Idress of the Incorporator is: Yolanda Colon			ander ⊒	P FIF
Name:	1618 NE 205th Terrace				ت جو چينه پرس
Address:	Miami FL 33179				л •9
					
Effective date, if	effective DATE: other than the date of filing: 11/20/20 ate is listed, the date must be specific and			ter the filin	ıg.)
	inserted in this block does not meet the app tive date on the Department of State's record		uirements, this date will not	be listed as	s the
	ned as registered agent to accept service of amiliar with and accept the appointment as			e designat	ed in this
	IlXxx .		11/12/20)19	
	Required Signature of Registered A	Agent	Date	:	-
I submit this doct to the Departmen	ument and affirm that the facts stated hereiv I of State constitutes a mird degree felony a	n are true. I am aware tha s provided for in s.817.155	t any false information subn i, F.S.	nitted in a d	document
Ų	Lille Olin		11/12/20)19	
	Required Signature of Incorpo	orator	Dat	e ,	-

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