

**N24000000542**

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP    ☐ WAIT    ☐ MAIL

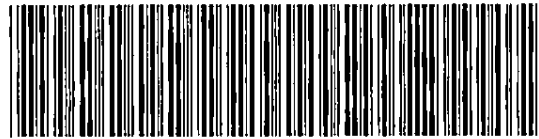
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FL

2023 MAY 12 10:40 AM

## COVER LETTER

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

**SUBJECT:** International Institute for Integrated Health and Higher Consciousness, Inc.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is 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

**ADDITIONAL COPY REQUIRED**

**FROM:** ELIZABETH MCLAUGHLIN

\_\_\_\_\_  
Name (Printed or typed)

251 CRANDON BLVD. UNIT 107

\_\_\_\_\_  
Address

KEY BISCAIYNE, FL 33149

\_\_\_\_\_  
City, State & Zip

603-86-1554

\_\_\_\_\_  
Daytime Telephone number

Elizamclaughlin@aol.com

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

DEPT. OF STATE  
TALLAHASSEE, FL

2023 MAY -5 AM 4:06

FILED

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

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

**ARTICLE I NAME**

The name of the corporation shall be: International Institute for Integrated Health and Higher Consciousness, Inc.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address:  
251 Crandon Blvd. Unit 107

Key Biscayne, FL 33149

Mailing address, if different is:

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: \_\_\_\_\_

**ARTICLE IV MANNER OF ELECTION** The manner in which the directors are elected and appointed: \_\_\_\_\_

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

Name and Title: Dr. Kenneth j. Emonds, Ph.D. D.

Address 251 Crandon Blvd Unit 107  
Key Biscayne, FL 33149

Name and Title: Frank Nochimson, MD D

Address: 251 Crandon Blvd Unit 107  
Key Biscayne, FL 33149

Name and Title: Elizabeth McLaughlin Sec/Treas.

Address 251 Crandon Blvd. Unit 107  
Key Biscayne, FL 33149

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

Address: \_\_\_\_\_

Name and Title: Asi Hacobian, MD D

Address 251 Crandon Blvd. #107  
Key Biscayne, FL 33149

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

Address: \_\_\_\_\_

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

Address: \_\_\_\_\_ Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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: Louis Nostro

Address: Louis Nostro, P.A.

1441 Brickell Ave, Suite 1230, Miami, FL 3313

**ARTICLE VII INCORPORATOR**

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

Name: ELIZABETH MCLAUGHLIN

Address: 251 CRANDON BLVD. # 107

KEY BISCAYNE, FL 33149

**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: \_\_\_\_\_ (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*

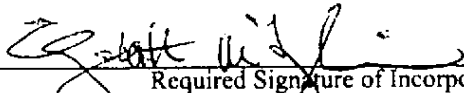
Lou Nostro

Required Signature of Registered Agent

9/1/23

Date

*I submit this document and affirm that the facts stated herein are true. I am aware that any 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.*



Required Signature of Incorporator

April 30, 2023

Date

2023 MAY -5 AM 4:06  
SECRETARY OF STATE  
TALLAHASSEE, FL

FILED