

To:

From: Yanet Avila

8/27/24, 3:21 PM

N24000010291

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H24000287290 3)))



H240002872903ABC1

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

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

From:

Account Name : EXPRESS CORPORATE FILING SERVICE INC.
Account Number : I20000000146
Phone : (305)444-4994
Fax Number : (305)328-4774

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

Email Address: _____

FLORIDA PROFIT/NON PROFIT CORPORATION
305 PSYCHOLOGY INC.

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

RECEIVED

2024 AUG 28 PM 4:36

SECRETARY OF STATE
TALLAHASSEE, FL

Electronic Filing Menu

Corporate Filing Menu

Help

To:

Page: 3 of 5

2024-08-28 20:38:48 GMT

13053284774

From: Yanet Avila

850-617-6381

8/28/2024 3:58:03 PM PAGE 1/001 Fax Server



August 28, 2024

FLORIDA DEPARTMENT OF STATE

Division of Corporations

EXPRESS CORPORATE FILING SERVICE INC.

SUBJECT: 305 PSYCHOLOGY INC.

REF: W24000122482

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.

Due to transmission problems, your faxed document or coversheet is illegible or incomplete. Please refax the document and cover sheet to this office for processing.

If you have any further questions concerning your document, please call (850) 245-6052.

Frantz Clerjuste
Regulatory Specialist II
New Filings Section

FAX Aud. #: H24000287290
Letter Number: 224A00019375

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

ARTICLE I NAME

The name of the corporation shall be: 305 Psychology INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address:

3735 SW 8 ST Suite #201,

Coral Gables, FL 33134

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: for the purpose of providing no-cost mental health services
to the community. The initial service offered will be free group therapy session. Furthermore,
we aim to eventually use this corporation to fund mental health services for individuals in the
Miami-Dade area who are in need of treatment but unable to afford such services.

ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected and appointed: through an
appointing authority, the president/ceo - Jessica Aleman, Psy.D.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Jessica Aleman, Psy.D. (President/CEO)

Name and Title: _____

Address 3735 SW 8 ST Suite #201,

Address: _____

Coral Gables, FL 33134

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

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: Jessica Aleman, Psy.D

Address: 3737 SW 8 ST Suite #201,
Coral Gables, FL 33134

ARTICLE VII INCORPORATOR

The name and address of the incorporator is:

Name: Jessica Aleman, Psy.D.

Address: 3735 SW 8 ST Suite #201,
Coral Gables, FL 33134

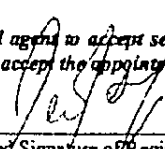
ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 08/24/2024 (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.)

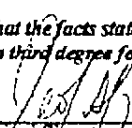
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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


Required Signature of Registered Agent

8/24/24
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

8/27/24
Date