

N98000002576

TRANSMITTAL LETTER

98 MAY -5 PM 3:05

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

SUBJECT: BEHAVIOR ANALYST CERTIFICATION BOARD, INC.
(Proposed corporate name - must include suffix)

300002512023--6
-05/05/98--01134--007
*****78.75 *****78.75

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

☐ \$122.50
Filing Fee
& Certified Copy

☐ \$131.25
Filing Fee,
Certified Copy
& Certificate

ADDITIONAL COPY REQUIRED

FROM: GERALD L. SHOOK, Ph. D.
Name (Printed or typed)

519 EAST PARK AVENUE
Address

TALLAHASSEE FLORIDA 32301
City, State & Zip

850.668. 8757
Daytime Telephone number

P. Hall

MAY -5 1998

(2)

RECEIVED
98 MAY -5 PM 2:58
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Not for Profit Corporation Act, hereby adopt(s) the following Articles of Incorporation:

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

BEHAVIOR ANALYST CERTIFICATION BOARD, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

East
519 Park Avenue, Tallahassee, Florida 32301

ARTICLE III PURPOSE(S)

The specific purpose(s) for which the corporation is organized is(are):

Credential Behavior Analysts

ARTICLE IV MANNER OF ELECTION OF DIRECTORS

The manner in which the directors are elected or appointed is:

As stated in corporate bylaws

ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

Gerald L. Shook, Ph.D.
519 East Park Avenue, Tallahassee, Florida 32301

ARTICLE VI INCORPORATOR

The name and address of the Incorporator to these Articles of Incorporation are:


Gerald L. Shook, Ph.D.
519 East Park Avenue, Tallahassee, Florida 32301


Signature/Incorporator

5/5/98
Date

(An additional article must be added if an effective date is requested.)

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


Signature/Registered Agent

5/5/98
Date