

P000000077774  
TRANSMITTAL LETTER

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

800003352908--4  
-08/10/00--01096--006  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

SUBJECT: COUNSELING FOR LIFE MANAGEMENT, 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 of  
Status

ADDITIONAL COPY REQUIRED

FROM: ROXANNA ACOSTA  
Name (Printed or typed)

9020 SW 215 Terrace  
Address

Miami, FL 33189  
City, State & Zip

(305) 661-4611 ext 8693  
Daytime Telephone number

FILED  
00 AUG 10 AM 9:51  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

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

T BROWN AUG 17 2000

# ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

## ARTICLE I NAME

The name of the corporation shall be:

COUNSELING FOR LIFE MANAGEMENT, INC.

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

13550 N. Kendall Dr. Suite 206, Miami, FL 33186 - business address  
9020 SW 215 Terrace, Miami, FL 33189 - mailing address

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To provide psychotherapy services to individuals, families and groups.

## ARTICLE IV SHARES

The number of shares of stock is:

1,000,000 @ \$0.01 each

## ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

Roxanna Acosta - President/Director  
9020 SW 215 Terrace, Miami FL 33189

## ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

Roxanna Acosta  
9020 SW 215 Terrace, Miami FL 33189

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Roxanna Acosta  
9020 SW 215 Terrace, Miami FL 33189

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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



Signature/Registered Agent

8-7-00

Date



Signature/Incorporator

8-7-00

Date

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SECRETARY OF STATE  
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