

TRANSMITTAL LETTER

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

6000003411536--4
-10/02/00--01111--011
*****70.00 *****70.00

SUBJECT: DROZ AND ASSOCIATES, 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: DROZ AND ASSOCIATES, INC.

Name (Printed or typed)

4021 CENTRAL AVENUE SUITE #B

Address

ST. PETERSBURG, FL. 33713

City, State & Zip

727-328-2208

Daytime Telephone number

00 OCT -2 PM 10:03
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

T. Burch OCT 4 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:

DROZ AND ASSOCIATES, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

4021 CENTRAL AVENUE SUITE #B
ST. PETERSBURG, FL. 33713

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

PSYCHOLOGICAL COUNSELING AND BUSINESS INVESTMENTS.

ARTICLE IV SHARES

The number of shares of stock is:

1000

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

RONALD T. DROZ, PSY.D.
4021 CENTRAL AVENUE SUITE #B
ST. PETERSBURG, FL. 33713

ARTICLE VI REGISTERED AGENT

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

SAME RONALD T. DROZ, PSY.D.
4021 CENTRAL AVENUE SUITE #B
ST. PETERSBURG, FL. 33713

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

SAME RONALD T. DROZ, PSY.D.
4021 CENTRAL AVENUE SUITE #B
ST. PETERSBURG, FL. 33713

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

Date

9/28/00

Signature/Incorporator

Date

9/28/00

FILED
00 OCT -2 PM 10:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA