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TRANSMITTAL LETTER

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

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Solution Partners, Psychotherapeutic, Life, and Training Services,

Inc.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

□ \$70.00

□ \$78.7*5*

Filing Fee Filing Fee & Certificate of Status

□ \$78.75 Filing Fee

Filing Fee & Certificate of Status

□ \$87.50

Filing Fee, Certificate Copy

& Certificate of

Status

ADDITIONAL COPY REQUIRED

FROM:

SUSAN M. CLERICI

Name (Printed or Typed)

2450 East Commercial Blvd, #4

Address

Fort Lauderdale, Florida 33308

City, State & Zip

(954)772-0076

Daytime Telephone number

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

G7/30/02

ARTICLES OF INCORPORATION

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

2002 JUL 29 AM 10: 41

SECRETARY OF STATE TALLAHASSEE FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

SolutionPartners, Psychotherapeutic, Life strategies and Training Services, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

2450 East Commercial Blvd, #4 Fort Lauderdale, Florida 33308

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Psychotherapeutic and coaching services for individuals, couples, families, and groups. As well as trainings for professionals, and for the general population. wherever located.

ARTICLE IV SHARES

The number of shares of stock is:

The maximum number of shares of stock that this corporation is authorized to have outstanding at any time is One Thousand (1000) shares of common stock, each share having a par value of \$0.50, all of which shall be constituted as voting shares and will possess full voting rights.

Authorized capital stock may be paid in cash, services or property, at a just value to be fixed by the Board of Directors of this at any regular or special meeting.

ARTICLE V INITIAL OFFICERS/DIRECTORS

The name(s) and address (es):

Susan M. Clerici 4172 Inverrary Dr., #310, Lauderhill FL 33319 President Claudia J. Cardona 9935 West Atlantic Blvd, Coral Springs FL 33071 Vice-President

ARTICLE VI REGISTERED AGENT

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

Alvaro Trujillo 10135 W Sunrise Blvd., #306 Sunrise, FL 33322

FILED

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ARTICLE VII INCORPORATOR

The name and address of the incorporator is:

Claudia J. Cardona 9935 West Atlantic Blvd, Coral Springs FL 33071

Susan M. Clerici

4172 Inverrary Dr., #310, Lauderhill FL 33319

SECRETARY OF STATE TALLAHASSEE FLORIDA

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

Sessaul Clerici, LMF+
Signature/Incorporator

07-24-02 Date
Ouly 11, 2002
Date