

P03000072157

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

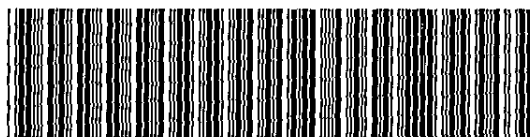
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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LAZARUS CORPORATE FILING SERVICE

3320 S.W. 87 AVENUE

MIAMI, FLORIDA (305)552-5973

TERESA ROMAN (TALLAHASSEE REPRESENTATIVE)

OFFICE USE ONLY

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. JOSEPH D ALLEN, LICENSED MENTAL HEALTH
(Corporation Name) (Document #)

2. COUNSELOR, INC.
(Corporation Name) (Document #)

3. _____
(Corporation Name) (Document #)

4. _____
(Corporation Name) (Document #)

☒ Walk in ☒ Pick up time 2:00

☒ Certified Copy

☐ Mail out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

| NEW FILINGS | |
|-------------------------------------|-------------------|
| <input checked="" type="checkbox"/> | Profit |
| <input type="checkbox"/> | NonProfit |
| <input type="checkbox"/> | Limited Liability |
| <input type="checkbox"/> | Domestication |
| <input type="checkbox"/> | Other |

| AMENDMENTS | |
|--------------------------|---------------------------------------|
| <input type="checkbox"/> | Amendment |
| <input type="checkbox"/> | Resignation of R.A., Officer/Director |
| <input type="checkbox"/> | Change of Registered Agent |
| <input type="checkbox"/> | Dissolution/Withdrawal |
| <input type="checkbox"/> | Merger |

| OTHER FILINGS | |
|--------------------------|------------------|
| <input type="checkbox"/> | Annual Report |
| <input type="checkbox"/> | Fictitious Name |
| <input type="checkbox"/> | Name Reservation |

| REGISTRATION/ QUALIFICATION | |
|--------------------------------|---------------------|
| <input type="checkbox"/> | Foreign |
| <input type="checkbox"/> | Limited Partnership |
| <input type="checkbox"/> | Reinstatement |
| <input type="checkbox"/> | Trademark |
| <input type="checkbox"/> | Other |

Examiner's Initials

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DIVISION OF CORPORATIONS
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ARTICLES OF INCORPORATION
OF

JOSEPH D. ALLEN, LICENSED MENTAL HEALTH COUNSELOR, INC.

ARTICLE I - NAME

The name of this corporation is Joseph D. Allen, Licensed Mental Health Counselor. The principal address of this corporation is 8640 SW 122 Street, Miami, FL 33156.

ARTICLE II - DURATION

This corporation shall have perpetual existence commencing on the date of the filing of these Articles with the Department of State.

ARTICLE III - PURPOSE

This corporation is organized for the purpose of transacting any or all lawful business.

ARTICLE IV - CAPITAL STOCK

This corporation is authorized to issue 100 Shares of \$1.00 par value common stock which shall be designated "Common Shares".

ARTICLE V - PRE-EMPTIVE RIGHTS

Every shareholder, upon the sale for cash of any new stock of this corporation shall have the right to purchase his prorata share thereof (as nearly as may be done without issuance of fractional shares) at the price at which it is offered to others.

ARTICLE VI - INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office of this corporation is _____

8640 SW 122 Street, Miami, FL 33156

and the name of the initial registered agent of this corporation at that address is

Joseph D. Allen

ARTICLE VII - INITIAL BOARD OF DIRECTORS

This corporation shall have (1) Director (s) constituting the initial Board of Directors.

The number of Directors may be either increased or decreased from time to time by the

By Laws. The name (s) and address (es) of the initial Board of Directors of this

corporation are:

| <u>NAME</u> | <u>ADDRESS</u> |
|------------------------|---------------------------|
| <u>Joseph D. Allen</u> | <u>8640 SW 122 Street</u> |
| | <u>Miami, FL 33156</u> |

ARTICLE VIII - INCORPORATORS

The names and address of each person signing these Articles are:

| <u>NAME</u> | <u>ADDRESS</u> |
|------------------------|---------------------------|
| <u>Joseph D. Allen</u> | <u>8640 SW 122 Street</u> |
| | <u>Miami, FL 33156</u> |

ARTICLE IX - INDEMNIFICATION

The corporation shall indemnify any officer or director, or any former officer or director, to the full extent permitted by law.

ARTICLE X - AMENDMENT

This corporation reserves the right to amend or repeal any provision contained in these Articles of Incorporation, or any amendment hereto, and any right conferred upon the shareholders is subject to this reservation.

IN WITNESS WHEREOF, the undersigned subscriber (s) have executed these Articles of Incorporation this 25 day of JUNE, 2003.

X J. Dallen
Subscriber:

STATE OF FLORIDA
COUNTY OF BROWARD

Before me, a Notary Public authorized to take acknowledgments in the State and County set forth above, personally appeared JOSEPH ALLEN, know to be and known by me to be the persons who executed the foregoing Articles of Incorporation, and they executed those Articles of Incorporation.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal in the State and County aforesaid, this 25 day of JUNE, 2003.

Gary Gray
Notary Public, State of Florida At Large

My Commission Expires:



Gary Gray
Commission #DD186715
Expires: Feb 23, 2007
Bonded Thru
Atlantic Bonding Co., Inc.

CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN FLORIDA, NAMING AGENT UPON WHOM PROCESS MAY BE SERVED.

IN COMPLIANCE WITH SECTION 48.091, FLORIDA STATUTE, THE FOLLOWING IS SUBMITTED:

FIRST THAT Joseph D. Allen, Licensed Mental Health Counselor.
(Name of Corporation)

DESIRING TO ORGANIZE OR QUALIFY UNDER THE LAWS OF THE STATE OF
FLORIDA, WITH ITS PRINCIPAL PLACE OF BUSINESS AT CITY OF

Miami, STATE OF Florida, HAS NAMED

Joseph D. Allen
(Name of Resident Agent)

LOCATED AT 8640 SW 122 Street
(Street Address and Number of Building, Post Office Box Addresses
are not Acceptable)

CITY OF Miami, STATE OF FLORIDA, AS ITS AGENT
(City)

TO ACCEPT SERVICE OF PROCESS WITHIN FLORIDA.

X J. D. Allen
Signature (Corporate Officer)

President & CEO
Title

6/25/03
Date

HAVING BEEN NAMED TO ACCEPT SERVICE OR PROCESS FOR THE ABOVE STATE CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER PERFORMANCE OF MY DUTIES.

X J. D. Allen
Signature (Resident Agent)

6/25/03
Date

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DIVISION OF CORPORATIONS
03 JUN 30 PM 2:18