

P04000001119

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

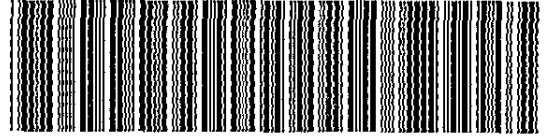
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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CLERK OF STATE
TALLAHASSEE, FLORIDA

03 DEC 19 PM 2:27

FILED

Handwritten initials and date: 1/5

TRANSMITTAL LETTER

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

SUBJECT: Robert E. Seifer, Ph.D., P.A.
(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 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: Robert E. Seifer
Name (Printed or typed)

1725 N. University Drive #350
Address

Coral Springs, FL 33071
City, State & Zip

(954) 857-4563
Daytime Telephone number

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

ARTICLES OF INCORPORATION

OF

Robert E. Seifer, Ph.D., P.A.

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**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

The undersigned incorporator, for the purpose of forming a corporation under the Florida General Corporation Act, and who is a natural person competent to contract, does hereby adopt the following Articles of Incorporation:

ARTICLE 1

The name of this Corporation shall be:

Robert E. Seifer, Ph.D., P.A.

ARTICLE 2

This Corporation shall have perpetual existence.

ARTICLE 3

The general nature of the business to be transacted by this Corporation is any and all business related to the practice of psychology.

ARTICLE 4

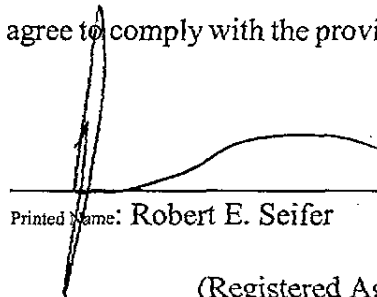
The aggregate number of shares which the Corporation is authorized to issue is One Thousand (1,000) shares. Such shares shall be of single class, and shall have a par value of ONE (\$1.00) DOLLAR.

ARTICLE 5

The street address of the initial registered office of the Corporation is: 1725 N. University Drive, #350, Coral Springs, Florida 33071 and the name of its initial registered agent at such address is **Robert E. Seifer**.

The mailing address of the Corporation is: P.O. Box 772056, Coral Springs, Florida 33077

I hereby accept to act as registered agent, and agree to comply with the provision of said Act relative to keeping open said office.


Printed Name: Robert E. Seifer

(Registered Agent)

ARTICLE 6

The number of Directors constituting the initial Board of Directors of the Corporation is one

(1). The names and address of the person who is to serve as a member of the initial Board of Directors is:

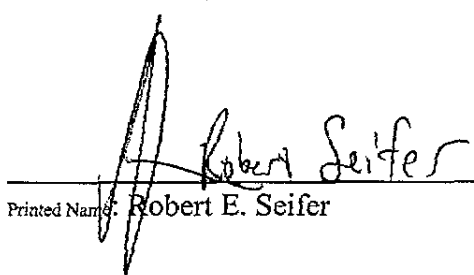
Robert E. Seifer
1725 N. University Drive #350
Coral Springs, Florida 33071

ARTICLE 7

The name and address of the incorporator is:

Robert E. Seifer
1725 N. University Drive #350
Coral Springs, Florida 33071

Executed this 15 day of December, 2003


Printed Name: Robert E. Seifer

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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