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STATE OF FLORIDA
TALLAHASSEE, FLORIDA

03 DEC 29 PM 6:08

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TRANSMITTAL LETTER

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

SUBJECT: Angelo R. Pimpinelli, 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: Angelo R. Pimpinelli

Name (Printed or typed)

P.O. Box 9173

Address

Winter Haven, FL 33883-9173

City, State & Zip

863-324-1380

Daytime Telephone number

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

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:

Angelo R. Pimpinelli, Ph.D., P.A.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

1000-1 Orchid Springs Drive
Winter Haven, FL 33884

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

to offer and provide academic and psychotherapeutic consulting services to individuals and organizations to include, but not limited to: psychotherapy (individual and group), personality & cognitive assessment, neurofeedback, Animal Assisted Therapy (AAT), Biker Therapy (BT), and Academic consulting.

ARTICLE IV SHARES

The number of shares of stock is:

1 (ONE)

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

Angelo R. Pimpinelli **PRESIDENT**
1000-1 Orchid Springs Drive
Winter Haven, FL 33884

ARTICLE VI REGISTERED AGENT

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


Angelo R. Pimpinelli
1000-1 Orchid Springs Drive
Winter Haven, FL 33884

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Angelo R. Pimpinelli
1000-1 Orchid Springs Drive
Winter Haven, FL 33884

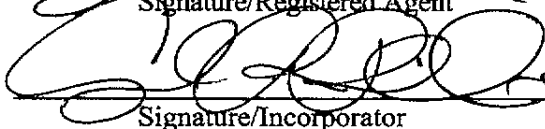
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent

12/26/03

Date



Signature/Incorporator

12/26/03

Date

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

03 DEC 29 PM 6:08

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