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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

9/3/9

TRANSMITTAL LETTER

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

SUBJECT: National Board of Forensic Evaluators, 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
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: Norman E. Hoffman, Ph.D., Ed.D, LMFT, LMHC

Name (Printed or typed)

595 W Granada Blvd., Suite H

Address

Ormond Beach, Florida 32174

City, State & Zip

(386) 677-3995

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:

National Board of Forensic Evaluators, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

595 W. Granada Blvd., Suite H

Ormond Beach, Florida 32174

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To develop a credible, and professionally nationally recognized training/certification process for licensed/certified mental health professionals to become certified as Forensic Psychological Evaluators, and other certified forensic professional specialists. To provide education and training in the forensic mental health field.

ARTICLE IV SHARES

The number of shares of stock is:

100 shares. They are divided as follows: 50 shares to Valerie Watt Hoffman, Ph.D., and 50 shares to Norman E. Hoffman, Ph.D.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Norman E. Hoffman 595 W. Granada Blvd., Suite H - Ormond Beach, Florida 32174 - President/Secretary

Valerie G. Hoffman 595 W. Granada Blvd., Suite H Ormond Beach, Florida 32174 - Vice President/Treasurer

ARTICLE VI REGISTERED AGENT

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

Norman E. Hoffman 595 W. Granada Blvd., Suite H., Ormond Beach, Florida 32174

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Norman E. Hoffman, Ph.D.

595 W. Granada Blvd., Suite H., Ormond Beach, Florida 32174

*****~*****


* 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 of Registered Agent

2-26-04

Date



Signature Incorporator

2-26-04

Date

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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