# PA4888050689

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DIVERSITY CONPORATIONS

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# TRANSMITTAL LETTER

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

SUBJECT: A-1-A	Addiction Treatment Cente (PROPOSED CORPORA)	1	CLUDE SUFFIX)	<del>-</del>
Enclosed are an origin	nal and one (1) copy of the artic	eles of incorporation a	nd a check for:	
□ \$70.00 Filing Fec	\$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy  ADDITIONAL (	\$87.50 Filing Fee, Certified Copy & Certificate of Status COPY REQUIRED	
FROM: Rol	bert Left Name (	Printed or typed)	<del></del>	grant 1
-	1740 Lakeshore Drive	ddress	· · · · · · · · · · · · · · · · · · ·	<u>=</u> .
<u>,</u>	Weston, FL 33326	State & Zip		+ 1
	954-559-5333 Daytime Te	elephone number		

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

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ARTICLES	CH	INCOR	PORA	TION

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit) To LETARY OF STATE
UTY/SIGN OF CORPOSTATE

### ARTICLE I NAME

The name of the corporation shall be:

A-1-A Addiction Treatment Center, Inc.

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### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

4750 N. DIXIE HWY SUITE 8

FT. LAUDERDALE FL 33334

### ARTICLE III **PURPOSE**

The purpose for which the corporation is organized is:

Advertising, Marketing and all business permitted under Florida law

## ARTICLE IV

The number of shares of stock is:

100

### ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

RUSTEMOGLU, AGOP

(President)

4750 N. DIXIE HWY SUITE 8

FT. LAUDERDALE FL 33334

### ARTICLE VI REGISTERED AGENT

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

LEFF, ROBERT 1740 LAKESHORE DRIVE WESTON, FL 33326

### ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is:

LEFF, ROBERT 1740 LAKESHORE DRIVE WESTON, FL 33326

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I a<u>m f</u>amiliar with and accept the appointment as registered agent and agree to act in this capacity