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TRANSMITTAL LETTER

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

SUBJECT: _ VaiS	Sar, Inc.			
	(PROPOSED CORPOR	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)	
Enclosed are an orig	ginal and one (1) copy of the art	icles of incorporation and	l a check for:	
S70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	□ \$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED	
FROM: N	Manuel Sarría, LCSW			e galak
	Name	e (Printed or typed)		
	15122 NW 87th Court	Address		, .
	Miami Lakes, FL 33018			
	City	, State & Zip		
	(786)853-4006			· Jagana
	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)

FILED

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SECRETAL STATE STATE FLORIDA

ARTICLE I NAME

The name of the corporation shall be: ValSar, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 15122 NW 87th Court, Miami Lakes, FL 33018

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To assess and provide services to adults who are referred, needing psychotherapy. To engage in any other legal activities.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s): Manuel Sarria, LCSW, President and Director 15122 NW 87th Court Miami Lakes, FL 33018

C. Cecilia Valdes, Vice President/Treasurer/Secretary/Director 15122 NW 87th Court Miami Lakes, FL 33018

ARTICLE VI REGISTERED AGENT

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

Manuel Sarria 15122 NW 87th Court Miami Lakes, FL 33018

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Manuel Sarria 15122 NW 87th Court Miami Lakes, FL 33018

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 Agen

Date

hulnul

Date

Signature/Incorporator