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DIVISION  
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21256

TRANSMITTAL LETTER

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

SUBJECT: Mirta Matos, Psy.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: Mirta Matos  
Name (Printed or typed)

8525 SW 92 Street, B-8  
Address

Miami FL 33156  
City, State & Zip

305-596-9989  
Daytime Telephone number

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS

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:

Mirta Matos Psy.D., P.A.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/ mailing address is:

8525 SW 92 Street # B-8  
Miami, FL 33156

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

transacting any and all lawful business, including but not limited to psychological testing, evaluations, therapy, neuropsychological testing.

**ARTICLE IV SHARES**

The number of shares of stock is:

One hundred shares

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

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

Mirta Matos, President/Director  
8525 SW 92 Street # B-8  
Miami, FL 33156

**ARTICLE VI REGISTERED AGENT**

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

Mirta Matos  
8525 SW 92 Street #B-8  
Miami FL 33156

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Mirta Matos, Psy.D.  
8525 SW 92 Street #B-8  
Miami FL 33156

\*\*\*\*\*

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:

Mirta Matos  
Signature/Registered Agent Mirta Matos

5/26/04  
Date

Mirta Matos Psy.D.  
Signature/Incorporator Mirta Matos, Psy.D.

5/26/04  
Date

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