# P05000110455

	equestor's Name)			
(77)	equestors Name)			
(Ac	ddress)			
(Ac	ddress)			
(Ci	ty/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Bu	ısiness Entity Nan	ne)		
`	<b>,</b>	· <b>,</b>		
	ocument Number)			
(50	ocument Namber)			
Certified Copies Certificates of Status				
Special Instructions to	Filing Officer:			
	_	1		
		Ì		
		}		
		]		
		j		
		1		

Office Use Only



000058182570

U\$/U\$/05--01059--016 \*\*87.50

FILEU # 16

V.S. 8 ,4

# TRANSMITTAL LETTER

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

ECT: Brigette	Gandarillas, P.A.  (PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDESUFFIX)
sed are an orig	inal and one (1) copy of the art	icles of incorporation and	a check for:
\$70.00	<b>\$78.75</b>	\$78.75	<b>2</b> \$87.50
Filing Fee	Filing Fee	Filing Fee	Filing Fee,
i milg i cc	& Certificate of Status	& Certified Copy	Certified Cop
	be certificate of Status	ac continue copy	& Certificate
			Status
		ADDITIONAL CO	
		<u> </u>	
FROM: Bri	gette Gandarillas		
	Name	e (Printed or typed)	
	2120 SW 16th Ter		
		Address	
	Miami, FL 33145		
		, State & Zip	
	305-495-8106		
		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)

### <u>ARTICLE I NAME</u>

The name of the corporation shall be:

Brigette Gandarillas, P.A.

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

The mailing address is: 2120 SW 16 Terrace Miami, FL 33145

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

- 1. to provide services associated with speech language and related therapy
- 2. to conduct and transact any business lawfully authorized and not prohibited by Chapter 621 of the Florida Statues, as the same may be amended from time to time.

### ARTICLE IV SHARES

The number of shares of stock is:

1,000 shares of Common Stock, \$1.00 par value per share.

### ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

-this section is optional-

### ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Brigette Gandarillas 2120 SW 16 Terrace Miami, FL 33145

### ARTICLE VII INCORPORATOR

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

Brigette Gandarillas 2120 SW 16 Terrace Miami, FL 33145

Brigette Gardrillas

te Sandarellas

8-4-05 Date

Brigette Coandarillas