POSABO132024

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Certified Copies	_ Certificates	of Status	
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2005 SEP 27 P 3 55.
SECRETARY OF STATE

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COVER LETTER

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

SUBJECT:	PROPOSED CORPORAT	TE NAME - MUST INCL	SW PA UDE SUFFIX)
Enclosed are an orig	rinal and one (1) copy of the artic	cles of incorporation and	I a check for:
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status DPY REQUIRED
FROM:	9325	(Printed or typed) Address	RD STE 208
	561-47	State & Zip	A 33434

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)
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: DENUSE BROOM LOSA PARTICLE II PRINCIPAL OFFICE
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is:
POCA RATION FL. 33434 ARTICLE III PURPOSE
The purpose for which the corporation is organized is:
NEW BUSINESS, MENTAL HEATH Care
ARTICLE IV SHARES
The number of shares of stock is:
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS
List name(s), address(es) and specific title(s):
DENKE BRODY- PRESIDENT - 122005 NW 71ST PARAGNO, Pl. 32076
Ruchano Bloog-corporate secretary- 12205 N27/JTPArkland, Fl. 3307
ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:
Richard Blood-12205 NW 715T PARKANO PL 33076
ARTICLE VII INCORPORATOR The name and address of the Incorporator is:
Richard Brood 12205 NW715T PAYMAND FL 33076
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
Keehad Brody 4/22/05
Signature/Registered Agent Date
Signature/Incorporator Date