

PD5000/33542

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

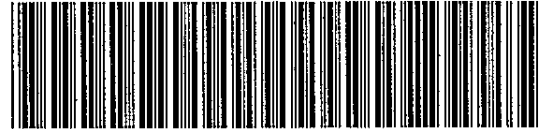
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



400059982204

09/29/05--01042--007 \*\*87.50

FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
05 SEP 29 AM 11:17

MRP  
9/30

## COVER LETTER

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

SUBJECT: Regina M. Pavone, Ph.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: Regina M. Pavone, Ph.D.  
Name (Printed or typed)

541 Northeast 105th Street  
Address

Miami Shores, Florida 33138  
City, State & Zip

(305) 546-3414  
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  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

### **ARTICLE I NAME**

The name of the corporation shall be:

Regina M. Pavone, Ph.D., P.A.

05 SEP 29 AM 11:17

### **ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailing address is:

9999 Northeast 2nd Avenue, Suite 202  
Miami Shores, Florida 33138

### **ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Psychological services

### **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):

Regina M. Pavone, Ph.D., Sole Shareholder, Director and Officer

### **ARTICLE VI REGISTERED AGENT**

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

Charmaine Defrancesco, Ph.D.  
541 Northeast 105th St.  
Miami Shores, FL 33138

### **ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

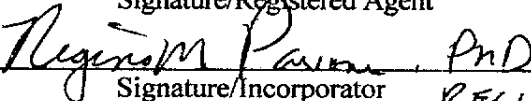
Regina M. Pavone, Ph.D.  
541 Northeast 105th St.  
Miami Shores, FL 33138

\*\*\*\*\*  
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 Agent

26 September 2005

Date

  
\_\_\_\_\_  
Signature/Incorporator REGINA M PAVONE, PhD

26 September 2005

Date