

POS000161975

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

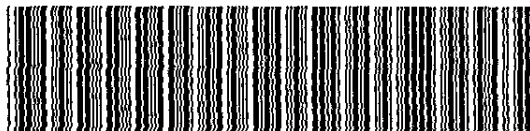
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FILED
2005 DEC -8 A 11:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

12-13-05

COVER LETTER

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

SUBJECT: PINES LAKES COUNSELING SERVICES, INC.
(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 ☒ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status
ADDITIONAL COPY REQUIRED

FROM: BARABARA F. EHRENBERG
Name (Printed or typed)

8970 TAFT ST.
Address

PEMBROKE PINES FL 33024
City, State & Zip

954-430-2333
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)

ARTICLE I NAME

The name of the corporation shall be:

PINES LAKES COUNSELING CENTER, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

8970 TAFT ST. PEMBROKE PINES, FLORIDA 33024

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

COUNSELING AND GENERAL SERVICES

ARTICLE IV SHARES

The number of shares of stock is:

500 COMMON

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

BARBARA F. EHRENBERG, PRESIDENT
101919 MAINSAIL DRIVE
COOPER CITY, FL 33026

ARTICLE VI REGISTERED AGENT

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

BARBARA F. EHRENBERG
101919 MAINSAIL DRIVE
COOPER CITY, FL 33026

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

BARBARA F. EHRENBERG
101919 MAINSAIL DRIVE
COOPER CITY, FL 33026

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

Barbara Ehrenberg

Signature/Registered Agent

Barbara Ehrenberg

Signature/Incorporator

FILED
2005 DEC -8 A 11:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

12/7/05

Date

12/7/05

Date