PO6000029 585

(Requestor's Name)		
(Address)		
(Address)		
(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL.
(Bu	siness Entity Nar	me)
(Do	cument Number)	<u> </u>
Certified Copies	Certificates	s of Status
Special Instructions to I	Filing Officer	
Opecial instructions to	i imig Onicer.	

Office Use Only



000066689900

(R/27/06--01089--002 **78.75

06 FEB 27 AH 8: 35
SEGNALAHASSEE FI CIRILA

J. Shivers MAR O L. 2006

TRANSMITTAL LETT

Department of State Division of Corporations 2661 Executive Venter Circle Tallahassee, Florida 32301

Subject

Communication Therapy Services, inc.

Enclosed is an original and three (3) copies 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

(ADDITIONAL COPY REQUIRED)

FROM:

Nellie Akalp

Name

30141 Agoura Rd., Suite 205

Address

Agoura Hills, California 91301

City, State & Zip

818-879-9079

Daytime Telephone number

NOTE: Please provide the original and one copy of the articles. Provide TWO copies if you have requested a certified copy as designated in the boxes above.

ARTICLES OF INCORPORATION OF Communication Therapy Services, Inc.

The undersigned incorporator, for the purpose of forming a corporation under the Florida business Corporation Act, hereby adopts the following articles of incorporation.

<u>ARTICLE I NAME</u>

The name of the Corporation shall be: Communication Therapy Services, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

8414 Tupelo Drive Tampa, Florida 33617

ARTICLE III SHARES

The number of shares that this corporation is authorized to have outstanding at any one time is: 1500 at \$0.01 par value per share.

ARTICLE IV OFFICERS/INITIAL DIRECTORS

The name(s) and address(s) of the Officers/initial Director(s) is/are:

Officers:

President: Otto F. Meyer

Vice President:

Treasurer: Otto F. Meyer

Secretary: Otto F. Meyer

Directors:

Otto F. Meyer 8414 Tupelo Drive Tampa, Florida 33617

ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Otto F. Meyer 8414 Tupelo Drive Tampa, Florida 33617

ARTICLES OF INCORPORATION OF Communication Therapy Services, Inc.

The undersigned incorporator, for the purpose of forming a corporation under the Florida business Corporation Act, hereby adopts the following articles of incorporation.

ARTIÇLE I NAME

The name of the Corporation shall be: Communication Therapy Services, Inc.

<u>ARTICLE II PRINCIPAL OFFICE</u>

The principal place of business and mailing address of this corporation shall be:

8414 Tupelo Drive Tampa, Florida 33617

ARTICLE III SHARES

The number of shares that this corporation is authorized to have outstanding at any one time is: 1500 at \$0.01 par value per share.

ARTICLE IV OFFICERS/INITIAL DIRECTORS

The name(s) and address(s) of the Officers/initial Director(s) is/are:

Officers:

President: Otto F. Meyer

Vice President:

Treasurer: Otto F. Meyer

Secretary: Otto F. Meyer

Directors:

Otto F. Meyer 8414 Tupelo Drive Tampa, Florida 33617

ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Otto F. Meyer 8414 Tupelo Drive Tampa, Florida 33617

ARTICLE VI INCORPORATOR The name and address of the incorporator to these A	rticles of Incorporation is:
Nellie Akalp 30141 Agoura Rd. Suite 205 Agoura Hills California 91301 Nellie Akalp, Incorporator	2/10/0U
Having been named as registered agent and to accent ser	vice of avacage for the above stated comparation at the

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Meyer, Registered Agent

2-20-06

Date