

P06000055131

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

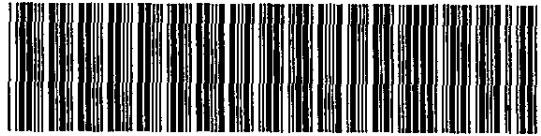
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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04/17/06--01018--015 **78.75

FILED
06 APR 17 PM 2:43
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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COVER LETTER

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

SUBJECT: Work of Autism, 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
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: Lena Mamone

Name (Printed or typed)

212 Jones Creek Drive

Address

Jupiter, Florida 33458

City, State & Zip

561-301-5764

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)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

Work of Autism, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

212 Jones Creek Drive, Jupiter, Florida 33458

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Education

ARTICLE IV SHARES

The number of shares of stock is:

1 Million

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

ARTICLE VI REGISTERED AGENT

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

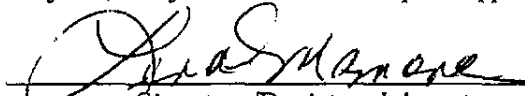
Lena Mamone
212 Jones Creek Drive
Jupiter, Florida 33458

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Lena Mamone
212 Jones Creek Drive
Jupiter, Florida 33458

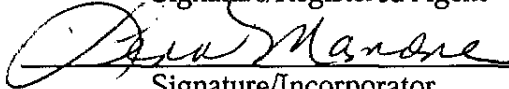
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent

04/13/2006

Date



Signature/Incorporator

04/13/2006

Date