

PO7000039414

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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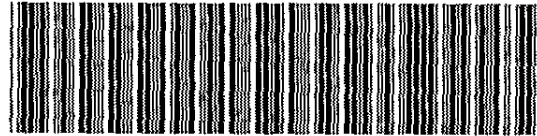
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: PsychConcepts, 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: Christine Jean, Psy.D.
Name (Printed or typed)

22170 SW 93rd Place
Address

Cutler Bay, FL 33190
City, State & Zip

786-368-7746
Daytime Telephone number

NOTE: Please provide the original and one copy of the articles.



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 16, 2007

CHRISTINE JEAN PSY.D
22170 SW 93RD PLACE
CUTLER BAY, FL 33190

SUBJECT: PSYCHCONCEPTS, INC.
Ref. Number: W07000013151

We have received your document for PSYCHCONCEPTS, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

A corporation may not act as its own incorporator. Please designate an individual, another active domestic or foreign corporation, with a street address.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call 850-245-6052.

Paisley A Alford
New Filing Section
Division of Corporations

Letter Number: 107A00018474

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:

PschyConcepts, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

13301 SW 124th Street
Miami, FL 33186

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To provide mental health services including therapeutic services, and psychological testing and evaluations.

ARTICLE IV SHARES

The number of shares of stock is:

1 (100)

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Christine Jean, Psy.D.
22170 SW 93rd Place, Cutler Bay, FL 33190
President

Iphon Louis
14610 SW 99th Ave, Miami, FL 33176
Vice-President/Financial Adviser

ARTICLE VI REGISTERED AGENT

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

Christine Jean, Psy.D.
22170 SW 93rd Place
Miami, FL 33190

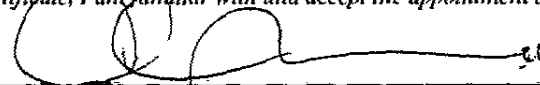

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Christine Jean, Psy.D.
22170 SW 93rd Place
Miami, FL 33190

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

	CHRISTINE JEAN	3/26/07
Signature/Registered Agent		Date
		3/26/07
Signature/Incorporator		Date