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(Requestor's Name)

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(Address)

(City/State/Zip/Phone #)

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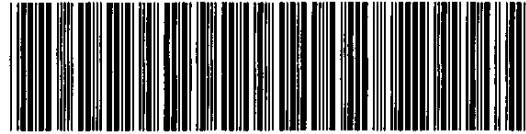
(Business Entity Name)

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

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2007 AUG 24 AM 11:23  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

J. Shivers AUG 25 2007

## TRANSMITTAL LETTER

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

**SUBJECT:** \_\_\_\_\_ **A WOMB'S VIEW INC**  
(Proposed corporate name - must include suffix)

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2007 AUG 24 AM 11:23

Enclosed is an original and one (1) copy of the articles of incorporation and a check for:

<b>\$70.00</b>	<b>\$78.75</b>
Filing Fee	Filing Fee & Certificate of Status

<b>\$78.75</b>	<b>\$87.50</b>	<b>X</b>
Filing Fee & Certified Copy	Filing Fee, Certified copy & Certificate of Status	
<b>ADDITIONAL COPY REQUIRED</b>		

FROM: HEIDI AGOSTINHO

Name (f

19751 SW 84TH AVENUE

MIAMI, FLORIDA 33189

City, State

DAYTIME TELEPHONE 305-926-2612  
Daytime Teleph

*Please forward all*  
Ac *Correspondence To:*



Leona Ray  
4321 NW 7th St  
Plantation, FL 33317

*Leona Ray*  
*Leona Ray*

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

## **ARTICLES OF INCORPORATION**

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

### **ARTICLE I      NAME**

The name of the Corporation shall be:

**A WOMB'S VIEW INC**

### **ARTICLE II      PRINCIPAL OFFICE**

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

**A WOMB'S VIEW INC**  
C/O HEIDI AGOSTINHO  
19751 SW 84TH AVENUE  
MIAMI, FLORIDA 33189

### **ARTICLE III      PURPOSE OF CORPORATION**

ANY and ALL LAWFUL BUSINESS PERTAINING TO PRE-NATAL ULTRASOUND NON-DIAGNOSTIC AND LACTATION SUPPORT AND EDUCATION.

### **ARTICLE IV      SHARES**

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

100 shares

### **ARTICLE V      INITIAL REGISTERED AGENT AND STREET ADDRESS**

LEONA J RAY  
4321 NW 7TH STREET  
PLANTATION, FLORIDA 33317

### **ARTICLE VI      INCORPORATOR**

The name and address of the incorporator to these Articles of Incorporation are:

HEIDI AGOSTINHO  
19751 SW 84TH AVENUE  
MIAMI, FLORIDA 33189

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**ARTICLE VII OFFICERS OF CORPORATION**

The name and address of the officers to these Articles of Incorporation are:

**TITLE: PRESIDENT**

HEIDI AGOSTINHO  
19751 SW 84TH AVENUE  
MIAMI, FLORIDA 33189

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TALLAHASSEE, FLORIDA

  
\_\_\_\_\_  
Signature/Incorporator

8/17/07  
\_\_\_\_\_  
Date

(An additional article must be added if an effective date is requested)

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.

  
\_\_\_\_\_  
Signature/Registered Agent

8-16-07  
\_\_\_\_\_  
Date