

PO80009160814

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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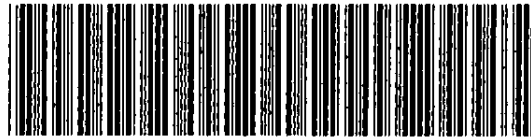
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Pa

COVER LETTER

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

SUBJECT: NEUROPSYCHOLOGY SERVICES OF NORTH FLORIDA, 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: HEATHER L. BRADLEY
Name (Printed or typed)

5140 MENAWA TRAIL
Address

MARIANNA, FL 32446
City, State & Zip

850-264-5489
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:

NEUROPSYCHOLOGY SERVICES OF NORTH FLORIDA, INC.

ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:

1401 CENTERVILLE ROAD, SUITE 504
TALLAHASSEE, FL 32308

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TO PERFORM SPECIALTY SERVICES WITHIN THE STATE OF FLORIDA.

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

HEATHER L. BRADLEY	DARYL J. RUPNIK
5140 MENAWA TRAIL	5140 MENAWA TRAIL
MARIANNA, FL 32446	MARIANNA, FL 32446
PRESIDENT	VICE-PRESIDENT

ARTICLE VI REGISTERED AGENT

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

HEATHER L. BRADLEY
5140 MENAWA TRAIL
MARIANNA, FL 32446

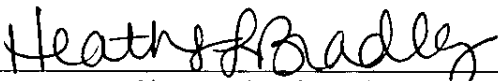
ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

HEATHER L. BRADLEY
5140 MENAWA TRAIL
MARIANNA, FL 32446

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TALLAHASSEE, FLORIDA

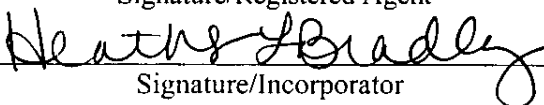
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent

07-10-2008

Date



Signature/Incorporator

07-10-2008

Date