

SECRETARY OF STATE
WASHINGTON, D. C.



COVER LETTER

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

SUBJECT: Dr. King & Associates, P.A.

(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: Dr. Elizabeth King
Name (Printed or typed)

101 South Fort Lauderdale Beach Blvd. #1704
Address

Fort Lauderdale, Florida 33316
City, State & Zip

954-732-6833
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:

Dr. King & Associates, P.A.

ARTICLE II PRINCIPAL OFFICE

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

101 South Fort Lauderdale Beach Blvd. #1704
Fort Lauderdale, Florida 33316

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Provide Psychotherapy Services

ARTICLE IV SHARES

The number of shares of stock is:

100 Shares

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

President & Director

Dr. Elizabeth King, EdD, LCSW
101 South Fort Lauderdale Beach Blvd. #1704
Fort Lauderdale, Florida 33316

ARTICLE VI REGISTERED AGENT

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

Altagracia Salas, CPA
4581 Weston Road # 196
Weston, Florida 33331

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Altagracia Salas, CPA
4581 Weston Road # 196
Weston, Florida 33331

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

Altagracia Salas, CPA
Signature/Registered Agent
Altagracia Salas, CPA
Signature/Incorporator

7-14-08
Date
7-14-08
Date

FILED
08 JUL 17 AM 11:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA