

P08000076200

(Requestor's Name)

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(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

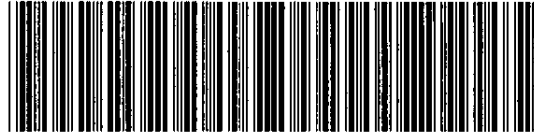
(Business Entity Name)

(Document Number)

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08/06/08--01005--010 **78.75

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2008 AUG 14 PM 4:29

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

W08-37095

2008 AUG 14 2008



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 6, 2008

SANDRA TIBALDEO
5853 SW 32 ST
MIAMI, FL 33155

SUBJECT: CHATTERBOX THERAPY SERVICES, INC.
Ref. Number: W08000037095

We have received your document for CHATTERBOX THERAPY SERVICES, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must list the corporation's principal street address and/or a mailing address in the document. A post office box is not acceptable for the principal address.

Please return the corrected original and one copy of 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) 245-6928.

Tim Burch
Regulatory Specialist II
New Filing Section

Letter Number: 108A00044794

RECEIVED
08 AUG 14 AM 8:00
DIVISION OF CORPORATIONS

COVER LETTER

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

SUBJECT: Chatterbox Therapy Services, 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: Sandra Tibaldeo
Name (Printed or typed)

5853 SW 32 St.
Address

Miami, FL 33155
City, State & Zip

(786) 271-8964
Daytime Telephone number

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

FILED

2008 AUG 14 PM 4: 29

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

Chatterbox Therapy Services, Inc.

ARTICLE II PRINCIPAL OFFICE

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

5853 SW 32 St.
Miami, FL 33155

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To provide rehabilitative therapy services

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):

Sandra Tibaldeo, 5853 SW 32 St., Miami, FL 33155, President & Secretary

ARTICLE VI REGISTERED AGENT

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

Franklin Tibaldeo
14770 SW 79 Ave.
Miami, FL 33158

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Sandra Tibaldeo
5853 SW 32 St.
Miami, FL 33155

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

Franklin Tibaldeo

Signature/Registered Agent

July 30, 2008

Date

Sandra Tibaldeo

Signature/Incorporator

7/30/08

Date