

PO90000 76505

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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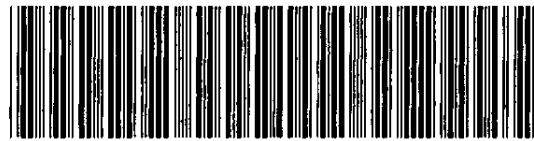
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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08 AUG 15 AM 10:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

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

MSPT, PA
SUBJECT: Livya Barreirinhas, PA
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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

encl. (B)
☒ \$70.00 ☒ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED	

Livya
FROM: ~~Livya~~ Barreirinhas
Name (Printed or typed)

9598 Parkview Avenue
Address

Boca Raton, FL 33428
City, State & Zip

(561)483-9701
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:

Livya Barreirinhas PT, PA

ARTICLE II PRINCIPAL OFFICE

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

9598 Parkview Avenue
Boca Raton, FL 33428

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Private Physical Therapy

ARTICLE IV SHARES

The number of shares of stock is:

1

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Livya Barreirinhas, president
9598 Parkview Avenue
Boca Raton, FL 33428

ARTICLE VI REGISTERED AGENT

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

Livya Barreirinhas
9598 Parkview Avenue
Boca Raton, FL 33428

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Livya Barreirinhas
9598 Parkview Avenue
Boca Raton, FL 33428

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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

Livya Barreirinhas
Signature/Registered Agent

Livya Barreirinhas
Signature/Incorporator

08/13/08

Date

08/13/08

Date