

P08000093821

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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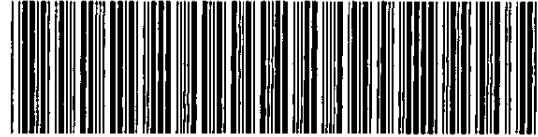
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
08 OCT 16 AM 11:34

gr 10/17/08

COVER LETTER

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

08 OCT 16 AM 11:34

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

SUBJECT: Therapist To Go, 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:

Jessica Leon

Name (Printed or typed)

16158 Emerald Cove Rd

Address

Weston, FL 33331

City, State & Zip

305-431-2162

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)

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ARTICLE I NAME

The name of the corporation shall be:

Therapist To Go, Inc.

ARTICLE II PRINCIPAL OFFICE

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

16158 Emerald Cove Rd
Weston, FL 33331

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To provide seminars for parents & mental health professionals.
To provide mental health services in the privacy & convenience
of clients homes

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):

Dr. Jessica Leon - President

ARTICLE VI REGISTERED AGENT

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

Dr. Jessica Leon
16158 Emerald Cove Rd
Weston, FL 33331

ARTICLE VII INCORPORATOR

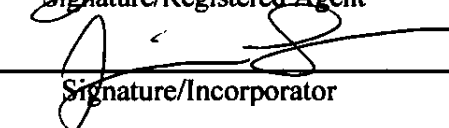
The name and address of the Incorporator is:

Dr. Jessica Leon
16158 Emerald Cove Rd
Weston, FL 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



Signature/Registered Agent



Signature/Incorporator

10/13/08

Date

10/13/08

Date