

PO9 000075090

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

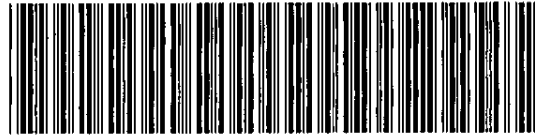
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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TALLAHASSEE, FLORIDA

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09 SEP - 9 AM 11:48  
TALLAHASSEE, FLORIDA

J. Shivers SEP 09 2009

## COVER LETTER

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

SUBJECT: THE MOSAIC CENTER  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is 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

**ADDITIONAL COPY REQUIRED**

FROM: LAW OFFICE OF NICOLE VALERIE JOHNSON  
Name (Printed or typed)

2866 WATERBROOK WAY  
Address

TALLAHASSEE, FLORIDA 32312  
City, State & Zip

850 -727-4128  
Daytime Telephone number

E-mail address: (to be used for future annual report notification)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

## **ARTICLES OF INCORPORATION**

The undersigned incorporator, for the purpose of forming a for profit corporate entity under Florida Statutes, Chapter 607 and or Chapter 621, adopt(s) the following Articles of Incorporation.

### **ARTICLE I**

The name of this corporation shall be: **THE MOSAIC CENTER, INC.**

### **ARTICLE II**

The principal place of business address is: **5408 TOURAIN DRIVE  
TALLAHASSEE, FLORIDA 32308**

The mailing address of corporation is: **P.O. BOX 14871  
TALLAHASSEE, FLORIDA 32317**

### **ARTICLE III**

The purpose for which this organization is formed: **FOR ANY AND ALL LAWFUL  
PURPOSE**

### **ARTICLE IV**

The number of shares of stock is: **100**

### **ARTICLE V**

The Initial Directors are as follows:

**Title: DIRECTOR  
MARIA HENRY  
5408 TOURAIN DRIVE  
TALLAHASSEE, FLORIDA 32308**

The Initial Officers are as follows:

**Title: PRESIDENT  
MARIA HENRY  
5408 TOURAIN DRIVE  
TALLAHASSEE, FLORIDA 32308**

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TALLAHASSEE, FLORIDA

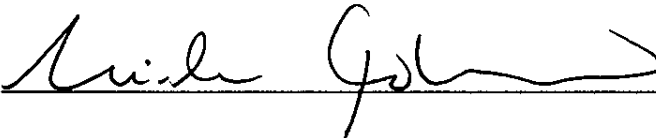
**ARTICLE VI**

The name and Florida address of the registered agent is:

**LAW OFFICE OF NICOLE VALERIE JOHNSON, P.A.  
2866 WATERBROOK WAY  
TALLAHASSEE, FLORIDA 32312**

*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 of Registered Agent:

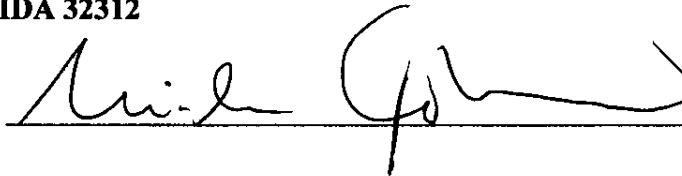


**ARTICLE VII**

The name and address of the Incorporator is:

**NICOLE VALERIE JOHNSON, ATTORNEY AT LAW  
LAW OFFICE OF NICOLE VALERIE JOHNSON, P.A.  
2866 WATERBROOK WAY  
TALLAHASSEE, FLORIDA 32312**

Signature of Incorporator:



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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA