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COVER LETTER

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

SUBJECT: Comprehensive Logopedic Services, Inc.			
(PROPOSED CORPORAT	'E NAME – <u>MUST INCLI</u>	JDE SUFFIX)	
Enclosed are an original and one (1) copy of the artic	les of incorporation and	a check for:	
\$\begin{align*} \Pi \\$70.00 & \Pi \\$78.75 \\ \text{Filing Fee} & \text{Certificate of Status} \end{align*}	□ \$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED	
FROM: Miyuki Hasegawa-Alonso		That I	
Name (Printed or typed)		010	
10825 SW 112th Avenue, Apt. 208		2010 APR 19	1
Address		9	Seminari 114
Miami, Florida 33176			A STATE OF THE PARTY OF THE PAR
City, S	State & Zip	9:49	New F ¹
305.562.3541			
Daytime Te	lephone number		

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

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

miyukihasegawa@hotmail.com

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:

Comprehensive Logopedic Services, Inc.

ARTICLE II PRINCIPAL OFFICE

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

10825 SW 112th Avenue, Apt. 208, Miami, FL 33176

ARTICLE III **PURPOSE**

The purpose for which the corporation is organized is: Any and all lawful business

ARTICLE IV SHARES

The number of shares of stock is: 100

INITIAL OFFICERS AND/OR DIRECTORS ARTICLE V

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

Name: Miyuki Hasegawa-Alonso Title: Executive Director

Address: 10825 SW 112th Avenue, Apt. 208

Miami, FL 33176

ARTICLE VI REGISTERED AGENT

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

Miyuki Hasegawa-Alonso

10825 SW 112th Avenue, Apt. 208

Miami, FL 33176

ARTICLE VII **INCORPORATOR**

The <u>name and address</u> of the Incorporator is:

Miyuki Hasegawa-Alonso

10825 SW 112th Avenue, Apt. 208

Miami, FL 33176

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/Register

Signature/Ind