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## **COVER LETTER**

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

SUBJECT: MT MITIVE BE WAVIUV (PROPOSED CORPORAT	INC.	UDE SUFFIX)	<del></del>
Enclosed are an original and one (1) copy of the article	les of incorporation and	l a check for:	
\$70.00 \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	S87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED	
FROM: Michelle A. SILV			SLORGTARY C SIVISION OF COM
14724 SW 37	Lth terr Idress		PORATION PROCESSION
Mramy FL 3 City, S	3 185 tate & Zip		22
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NOTE: Please provide the original and one copy of the articles.



## FLORIDA DEPARTMENT OF STATE Division of Corporations

RECEIVED

10 MAY 12 AN II: 37

April 13, 2010

MICHELLE A. SILVERMAN 14724 SW 37TH TERR MIAMI, FL 33185

SUBJECT: INTUITIVE BEHAVIOR, INC.

Ref. Number: W10000017926

We have received your document for INTUITIVE BEHAVIOR, 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):

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

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) 245-6973.

Claretha Golden Regulatory Specialist II New Filing Section

Letter Number: 610A00009049

ARTICLES OF INCORPORATION	
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)	SECRETARY OF STATE
ARTICLE I NAME	DIVISION OF CORPORATIONS
The name of the corporation shall be:	2010 HAY 12 PM 2: 22
Intuitive Behavior, Inc.	70101141.15 111 5.55
ARTICLE II PRINCIPAL OFFICE	
The principal <u>street</u> address and mailing address, if different is:	
13876 SW 56+h St, Apt 476	
Miami, FL 33175	
ARTICLE III PURPOSE	
The purpose for which the corporation is organized is:	j
Provide therapy for children with to	ducational.
Provide therapy for children with en rearning and developmental delays.	,
ARTICLE IV SHARES	
The number of shares of stock is:	
ONF	
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS	
List name(s), address(es) and specific title(s): Michelle Silverman (owner)	
147 by sw 37+h terrocce	
Miami, FL 33185	
ARTICLE VI' REGISTERED AGENT The name and Florida street address (B.O. Box NOT acceptable) of the register	and acouties
The <u>name and Florida street address</u> (P.O. Box NOT acceptable) of the register	ered agent is:
Michalle Silverman	
Miami, FL 33185	
ARTICLE VII INCORPORATOR	
The name and address of the Incorporator is:	
Michelle Silverman 14724 SW 37th terrace	
14724 SW 37+h terrace	
Miami,FL 33185	
******************	*******

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 gapacity

Signature/Registered Agent

Signature/Incorporator