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10/18/11

COVER LETTER

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

SUBJECT: Thrive Psychological Associates P.A.
(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: James Miller
Name (Printed or typed)

1665 Palm Beach Lakes Blvd. Ste. 101
Address

West Palm Beach FL 33401
City, State & Zip

561-762-4492
Daytime Telephone number

J_miller@bellsouth.net

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

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

**ARTICLES OF INCORPORATION FOR
Thrive Psychological Associates P.A.**

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ARTICLE I: NAME

The name of the corporation shall be: Thrive Psychological Associates P.A.

ARTICLE II PRINCIPAL OFFICE

The principal street address is 2929 SW 3rd Avenue, Suite 430
Miami, FL 33219

ARTICLE III PURPOSE

The purpose for which the corporation is organized is for Psychological services and any lawful purpose.

ARTICLE IV SHARES

The number of shares of Stock is one class in the authorized number of 100 shares.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Efrain A. Gonzalez, President /director
Address: 2929 SW 3rd Street, Suite 430
Miami, FL 33129

Name and Title: Anabel-Alvarez-Jimenez, Treasure/ Director: VP
Address: 2929 SW 3rd Street, Suite 430
Miami, FL 33129

Name and Title: Samantha Behbahani, Secretary, VP
2929 SW 3rd Street, Suite 430
Miami, FL 33129

ARTICLE VI REGISTERED AGENT

The name and address of the registered agent is:

Name: James Miller
1665 Palm Beach Lakes Blvd., Suite 101
West Palm Beach, FL 33401

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: James Miller
1665 Palm Beach Lakes Blvd., Suite 101
West Palm Beach, FL 33401

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.


James Miller

10-4-11
Dated:

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felon as provided for in s. 817.155, F.S.


James Miller

10-4-11
Dated:

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