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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

NOV 16 2011
J. Shivers

COVER LETTER

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

SUBJECT: BioPsych Diagnostics, 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: Richard Elias Fernandez, Ph.D.
Name (Printed or typed)

223 East Flagler St., Suite 432
Address

Miami, FL 33131
City, State & Zip

305-397-9094
Daytime Telephone number

refelias@gmail.com
E-mail address: (to be used for future annual report notification)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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)

ARTICLE I NAME

The name of the corporation shall be: BioPsych Diagnostics, P.A.

ARTICLE II PRINCIPAL OFFICE

Principal ~~street~~ address: 223 East Flagler St., Suite 432
Miami, FL 33131

Mailing address, if different is: _____

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
Neuropsychological diagnosis and treatment of
psychiatric patients.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: <u>Richard Elias Fernandez, Ph.D.</u>	Name and Title: _____
Address: <u>223 East Flagler St.,</u>	Address: _____
<u>Suite 432</u>	_____
<u>Miami, Florida 33131</u>	_____
Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____
Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____

ARTICLE VI REGISTERED AGENT

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

Name: Richard Elias Fernandez, Ph.D.
Address: 223 East Flagler St., Suite 432
Miami, FL 33131

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Richard Elias Fernandez, Ph.D.
Address: 223 East Flagler St., Suite 432
Miami, FL 33131

Article VIII Effective Date: January 1, 2012

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

E. F. Z., Ph.D.

Required Signature/Registered Agent

11/10/11
Date

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 felony as provided for in s.817.155, F.S.

E. F. Z., Ph.D.

Required Signature/Incorporator

11/10/11
Date

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TALLAHASSEE, FLORIDA