

P12000012934

(Requestor's Name)

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☐ PICK-UP

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(Business Entity Name)

(Document Number)

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Special Instructions to Filing Officer:

W12-5016

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000219088270

01/25/12--01007--014 **78.75

FILED
12 FEB -6 PM 1:02
SECRETARY OF STATE
TALLAHASSEE, FL 32301

VH

COVER LETTER

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

SUBJECT: Advanced Psychiatric Solutions, Incorporated
(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: Stephen Ryan
Name (Printed or typed)
6150 Metrowest Blvd Ste 103
Address
Orlando FL 32835
City, State & Zip
(407) 462 6701
Daytime Telephone number
Sryan1002cf1.org.com
E-mail address: (to be used for future annual report notification)

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 26, 2012

STEPHEN RYAN
6150 METROWEST BLVD STE 103
ORLANDO, FL 32835

SUBJECT: ADVANCED PSYCHIATRIC SOLUTIONS, INCORPORATED
Ref. Number: W12000005016

We have received your document for ADVANCED PSYCHIATRIC SOLUTIONS, INCORPORATED 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) 245-6962.

Valerie Herring
Regulatory Specialist II
New Filing Section

Letter Number: 312A00002294

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

FILED

ARTICLE I NAME

The name of the corporation shall be:

Advanced Psychiatric Solutions, 12 FEB 06 PM 1:02

ARTICLE II PRINCIPAL OFFICE

Principal street address

6150 Metrowest Blvd

Ste 103

Orlando FL 32835

Mailing address, if different is:

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Ensure effective planning, strengthen program services, ensure adequate financial resources and ensure legal and ethical integrity of daily operations.

ARTICLE IV SHARES

The number of shares of stock is:

100 shares to be divided evenly between the two parties listed 50/50

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Stephen Ryan, VP

Address: 6150 Metrowest Blvd

Ste 103

Orlando FL 32835

Name and Title:

Address:

Name and Title: Sajid Hafeez, President

Address: 6150 Metrowest Blvd

Ste 103

Orlando FL 32835

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

ARTICLE VI REGISTERED AGENT

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

Name: Stephen Ryan

Address: 2933 Azalea Rd

Apopka FL 32703

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Stephen Ryan

Address: 2933 Azalea Rd

Apopka FL 32703

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

Required Signature/Registered Agent

Date

1-22-12

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.

Required Signature/Incorporator

Date

1-22-12