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Florida Department of State  
Division of Corporations  
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To: Division of Corporations  
Fax Number : (850) 617-6381

From: Account Name : C T CORPORATION SYSTEM  
Account Number : PCA000000023  
Phone : (850) 222-1092  
Fax Number : (850) 878-5368

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TALLAHASSEE, FLORIDA  
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\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: \_\_\_\_\_

FLORIDA PROFIT/NON PROFIT CORPORATION  
Psychex PEO IV, Inc.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$70.00

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JUN 11 2012

**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: Psychox PEQ IV, Inc.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address  
911 Panorama Trail South  
Rochester NY 14625

Mailing address, if different is:  
\_\_\_\_\_  
\_\_\_\_\_

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

To engage in any lawful act or activity for which a corporation may be organized under the laws of Florida

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**ARTICLE IV SHARES**

The number of shares of stock is: 200 shares of common stock, no par value

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Kevin Hill, President  
Address: 911 Panorama Trail South  
Rochester NY 14625

Name and Title: Stephanie Schaeffer, Secretary  
Address: 911 Panorama Trail South  
Rochester NY 14625

Name and Title: Efrain Rivera, Treasurer, Sole Director  
Address: 911 Panorama Trail South  
Rochester NY 14625

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: CT Corporation System  
Address: 1200 South Pine Island Road  
Plantation, Florida 33324

**ARTICLE VII INCORPORATOR**

The name and address of the incorporator is:

Name: Michael Nesbitt  
Address: 911 Panorama Trail South  
Rochester NY 14625

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.  
CT Corporation System

By: Connie Bryan 6/8/12  
Required Signature/Registered Agent Date

**Assistant Secretary**

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.

Michael Nesbitt 6/8/12  
Required Signature/Incorporator Date