

P12000056780

(Requestor's Name)

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(City/State/Zip/Phone #)

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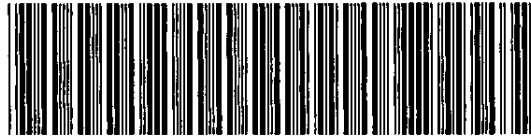
(Business Entity Name)

(Document Number)

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12 JUN 22 PM 4:45
SECRETARY OF STATE
TALLAHASSEE, FL 32399

2 Burch JUN 25 2012

COVER LETTER

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

SUBJECT: MC TREATMENT CONSULTANTS, INC.
(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: MC TREATMENT CONSULTANTS, INC.
Name (Printed or typed)

10943 BLACK HAWK STREET
Address

PLANTATION, FL. 33324
City, State & Zip

954-644-9452
Daytime Telephone number

CNICOTRA0103@COMCAST.NET
E-mail address: (to be used for future annual report notification)

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: MC TREATMENT CONSULTANTS, INC

ARTICLE II PRINCIPAL OFFICE

Principal street address
10943 BLACKHAWK STREET
PLANTATION, FL 33324

Mailing address, if different is:

CAROLYN NICOTRA
8948 SW 21ST COURT UNIT A
BOCA RATON, FL 33433

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
CONSULTING

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: MARGURITE CASTELLANO
Address: 10943 BLACK HAWK STREET
PLANTATION, FL 33324
PRES/SECY

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

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: MARGURITE CASTELLANO
Address: 10943 BLACK HAWK STREET
PLANTATION, FL 33324

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

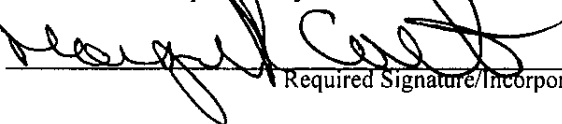
Name: MARGURITE CASTELLANO
Address: 10943 BLACK HAWK STREET
PLANTATION, FL 33324

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

06/15/2012
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.


Required Signature/Incorporator

06/15/2012
Date

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TALLAHASSEE, FL
SECRETARY OF STATE