

Florida Department of State  
Division of Corporations  
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**FLORIDA PROFIT/NON PROFIT CORPORATION  
PSYCHOLOGICAL WELLNESS CENTER, P.A.**

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ARTICLES OF INCORPORATION  
OF

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The undersigned incorporator(s), for the purpose of forming a Professional Service Corporation under Chapter 621 of the Florida Statutes, hereby adopt(s) the following Articles of Incorporation

ARTICLE I NAME

The name of the corporation shall be:

Psychological Wellness Center, P.A.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

13509 SW 122 Av  
Miami, FL 33186

ARTICLE III PURPOSE

The purpose of this corporation shall be:

Psychological evaluation, consultation, and treatment

ARTICLE IV CAPITAL STOCK

The number of shares of stock that this corporation is authorize to have outstanding is:

100

ARTICLE V INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:

Marele Orozco, Psy.D.  
13509 SW 122 Av  
Miami, FL 33186

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ARTICLE VI BOARD OF DIRECTOR (S)

The name and address of the initial board of director(s) shall be:

Marele Orozco, Psy. D.  
13509 SW 122 Av  
Miami, FL 33186.

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ARTICLE VII OFFICER (S)

The name, title and address of the officer(s) of this corporation shall be:

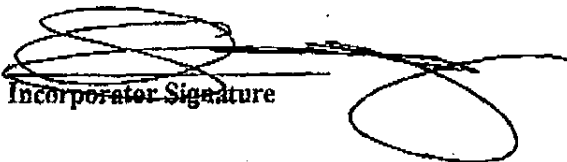
Marele Orozco, Psy. D.  
13509 SW 122 Av  
Miami, FL 33186

ARTICLE VIII INCORPORATOR (S)

The name and address of the incorporator(s) to these Articles of Incorporation shall be:

Marele Orozco, Psy. D.  
13509 SW 122 Av  
Miami, FL 33186.

The undersigned has (have) executed these Articles of Incorporation this 16<sup>th</sup> day of November, 2012.

  
Incorporator Signature

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**CERTIFICATE OF DESIGNATION  
REGISTERED AGENT/REGISTERD OFFICE**

**HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF  
PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE  
DESIGNATED IN THE ARTICLES OF INCORPORATION, I HEREBY ACCEPT THE  
APPOINTMENT AS REGISTERED AND AGREE TO ACT IN THIS CAPACITY. I  
FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES  
RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES,  
AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION  
AS REGISTERED AGENT.**

  
REGISTERED AGENT SIGNATURE

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