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(Re	equestor's Name)			
(Ad	ldress)			
(Ac	idress)			
(Cil	ty/State/Zip/Phone	· ***)		
PICK-UP	MAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				





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13 AUG -6 AM 10: 12
SECRETARY OF STATE
ALL AHASSEE FLORIDA

COVER LETTER

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

SUBJECT: Parl	ham Counseling	, Inc.	
	(PROPOSED CORPORA	ATE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the ar	ticles of incorporation and	d a check for:
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED
FROM: R	obert W. Parhar	ne (Printed or typed)	
45	524 Oak Fair Blv		
Ta	ampa, FL 33610		

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

City, State & Zip

Daytime Telephone number

r.parham68@gmail.com

E-mail address: (to be used for future annual report notification)

813-246-9428

FILED

ARTICLES OF INCORPORATION

13 AUG -6 AM 10: 12

PARHAM COUNSELING, III.

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profite RETARY OF STATE TALLAHASSEE FLORIDA

Article I: Business Name

The name of the business is Parham Counseling, Inc.

Article II: Place of Business

The principal place of business and mailing address of the corporation is:

4524 Oak Fair Blvd., Suite 225 Tampa, FL 33610

The corporation may also maintain offices at such other places within or without the State of Florida as the Board of Directors may, from time to time, require.

Article III: Purpose

The specific purpose of this professional corporation is to provide mental health evaluation, treatment, consultation, supervision, and education services to the community and community agencies.

Article IV: Shares of Stock

The number of shares of stock that this corporation is authorized to have is 500.

Article V: Initial Directors/Officers

The Directors/Officers of the corporation are as follows:

President:

Robert W. Parham 355 Forest Park Rd.

Oldsmar, FL 34677

Vice President:

Traci M. Parham 355 Forest Park Rd. Oldsmar, FL 34677

Secretary/Treasurer:

Robert W. Parham 355 Forest Park Rd. Oldsmar, FL 34677

Article VI: Registered Agent

The Registered Agent for the corporation is: Robert W. Parham 355 Forest Park Rd. Oldsmar, FL 34677

Article VII: Incorporator

The Incorporator of the corporation is: Robert W. Parham 355 Forest Park Rd.

Oldsmar, FL 34677

Article VIII: Effective Date

The effective date for operation of this corporation is July 23, 2013.

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

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 in s.817.155, F.S.

Required Signature/Incorporator

Date

TALLAHASSEE FLORIDA