

P/50000498

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

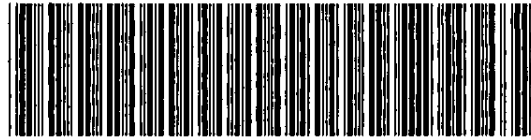
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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01/13/15--01009--011 **70.00

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15 JAN 13 PM 12:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JAN 15 2015

S. GILBERT

December 24, 2014

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

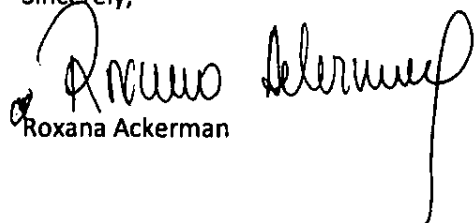
Re: P11000062804 Psych Alternative Inc

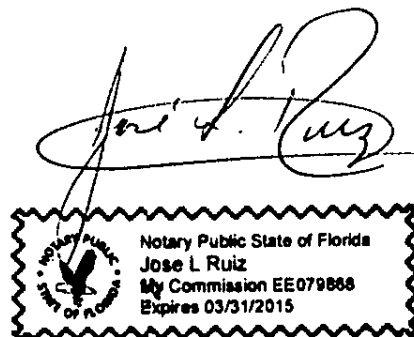
To whom it may concern:

By means of this letter I am advising that I have no intentions of re-instating the above mentioned dissolved corporation.

Should you have any questions or concerns please do not hesitate to contact me.

Sincerely,


Roxana Ackerman



COVER LETTER

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

SUBJECT: **PSYCH ALTERNATIVE 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: **MARIA E RUIZ**

Name (Printed or typed)

7750 SW 117TH AVE SUITE 201D

Address

MIAMI FLORIDA 33183

City, State & Zip

305 595-2407

Daytime Telephone number

MARIAQUIROS9@HOTMAIL.COM

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: PSYCH ALTERNATIVE INC

FILED

ARTICLE II PRINCIPAL OFFICE

Principal street address

15635 S.W. 16 Court

Pembroke Pines, Florida 33027

15 JAN 13 PM 12:00
Mailing address, if different:
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: any and all legal purposes

ARTICLE IV SHARES

The number of shares of stock is: 100 @ \$1.00 ea

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Roxana Ackerman, Pres

Name and Title: _____

Address 15635 SW 16 Court

Address: _____

Pembroke Pines, Florida 33027

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: Roxana Ackerman

Address: 15635 SW 16 court

Pembroke Pines, Florida 33027

ARTICLE VII INCORPORATOR

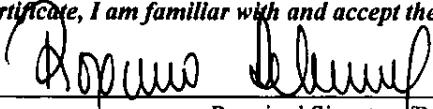
The name and address of the Incorporator is:

Name: Roxana Ackerman

Address: 15635 SW 16 Court

Pembroke Pines, Florida 33027


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

x 
Required Signature/Registered Agent

12/22/2014

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.

x 
Required Signature/Incorporator

12/22/2014

Date