Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H16000112671 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name : EXPRESS CORPORATE FILING SERVICE INC.

Account Number : I20000000146

Phone : (305)444-4994

Fax Number

: (305)444-4977

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Consil	Addmoccs			

FLORIDA PROFIT/NON PROFIT CORPORATION SOUTH FLORIDA SERVICES AND SUPPORT, INC.

Certificate of Status Certified Copy 1 Page Count 03 Estimated Charge \$78.75

Electronic Filing Menu

Corporate Filing Menu

Help

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME The name of the corpora	SOUTH FLORIDA SERVI	CES AND SUPPORT, INC.	
ARTICLE II PRINC		Mailing address, i	f different is:
17371 SW 18th ST		VIII. 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	
MIRAMAR, FL 33029			
ARTICLE III PURPO The purpose for which to AND THEIR FAMILIE	he corporation is organized is:	E BEHAVIORAL SERVICES TO CF	III.DREN
		·	
			_
	stock is: LOFFICERS AND/OR DIRECTORS		-5 ANII: 09
	VICTOR ASTACIO (P)		
Address	MIRAMAR, FL 33029	Address:	
Name and Title			
Address		Address:	
Name and Title		Name and Title:	
Address			

Name ar	nd Title:	Name and Title:		
Addres	s	Address:		
ARTICLE VI	REGISTERED AGENT			
Name:	Florida street address (P.O. Box NOT accep VICTOR ASTACIO	anie) of the registeren agent is.		
Address:	17371 SW 18th ST			
	MIRAMAR, FL 33029	16 MAY		
ARTICLE VII	<u>INCORPORATOR</u>	حرابة الم		
The name and a	address of the incorporator is:			
Name:	VICTOR ASTACIO			
Address:	17371 SW 18th ST			
	MIRAMAR, FL 33029			
Effective date, i (If an effective days after the i Note: If the dat	filing.)	(OPTIONAL) d cannot be more than five business days prior or 90 business plicable statutory filing requirements, this date will not be listed a secords.		
Having been no this certificate, I	med as registered agent to accept service of pre and familiar with and accept the appointment a	cess for the above stated corporation at the place designated in registered agent and agree to not in this capacity — [2]]		
	Required Signature/Registered Agent	5/3//6 Date		
I submit this document to the	cument and affirm that the facts stated bersin. Department of State constitutes a third tegree f	are true. I am arrare that the false information originated is a close as provided for in s.817.155, F.S.		
		5/3/1/6		
	Required Signature/Incorporator	The The state of t		