P1600091292

Office Use Only

W16000 63933

NOV 1 5 2016

T. SCOTT



400289961854

RECEIVED SEP 1 2 REC'D

09/13/16--01004--021 **78.75





FLORIDA DEPARTMENT OF STATE Division of Corporations

18 107 IA PHI2: 49

October 26, 2016

LILLANA VILLAFANE 15460 NW 83RD PLACE MIAMI, FL 33016

SUBJECT: ROLLED STONE MENTAL HEALTH SERVICES, P.A.

Ref. Number: W16000063933

We have received your document for ROLLED STONE MENTAL HEALTH SERVICES, P.A. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The specific business purpose of the professional association must be stated in the document.

If your business entity does not intend to transact business until January 1st of the upcoming calendar year, you may wish to revise your document to include an effective date of January 1st. If you do not list an effective date of January 1st, your business entity will become effective this calendar year and it will be required to file an annual report and pay the required annual report fee for the upcoming calendar year this coming January, which is merely weeks away. By listing an effective date of January 1st, the entity's existence will not begin until January 1st of the upcoming year and will, therefore, postpone the entity's requirement to file an annual report and pay the required annual report filing fee until the following calendar year.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Tyrone Scott
Regulatory Specialist II
New Filings Section

Letter Number: 516A00022973

TRANSMITTAL LETTER

Department of State Division of Corporations P.O. 6327 Tallahassee, FL 32314

Subject: Rolled Stone Mental Health Services, P.A.

(Proposed corporate name - must include suffix)

Enclosed is an original and one (1) copy of the articles of incorporation and a check for:

()\$35.00 ()\$43.75 ()\$70.00 (X)\$78.75

From:

Beatriz Liliana Villafane

Name

15460 NW 83rd Place

Address

Miami, FL 33016

City, State & Zip

(786) 202-0246

Daytime Telephone number

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

ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE | NAME

The Name of the corporation shall be:

Rolled Stone Mental Health Services, P.A.

ARTICLE II PRINCIPAL OFFICE

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

15460 NW 83rd Place Miami, FL 33016

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

1,000 shares of common

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Beatriz Liliana Villafane 15460 NW 83rd Place Miami, FL 33016

ARTICLE V INITIAL OFFICER AND/OR DIRECTORS AND STREET ADDRESS

Beatriz Liliana Villafane President 15460 NW 83rd Place Miami, FL 33016 TIS NOV ILL AM ID: 38

ARTICLE VI NATURE OF BUSINESS

The corporation will provide adult, child & adolecent psychiatric services under a licensed physician. The corporation may engage or transact in any or all lawful activities or business permitted under the laws of the United States, the State of Florida or any other state, county, territory or nation.

ARTICLE VII INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is (are):

Beatriz Liliana Villafane 15460 NW 83rd Place Miami, FL 33016

The undersigned	i incorporator(s) has(have) executed th	lese Articles of incorporation this
Sixth (6th)	day of <u>September</u> 2016	hy/ware
		signature
		signature
		signature

Article of Incorporation Filling Fee - \$35

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 OR 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is:	Rolled Stone Mental Health Services, P.A.		
•			
2. The name and address of the registered agent and office is:			
	Beatriz Liliana Villafane		
	(Name)		
	15460 NW 83rd Place		
	(P.O. Box not acceptable)		
	Miami, FL 33016		
	(City/State/Zip)		
Having been named as registered agent and to accept service of process for the above state corporation at the place designated in this certificate, I hereby accept the appointment as registered agent 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. (Signature)			