

**Florida Department of State**  
**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.**

((H17000168854 3)))



H170001688543ABC7

**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 : LAZARUS CORPORATE FILING SERVICE, INC.  
 Account Number : I20000000019  
 Phone : (305)552-5973  
 Fax Number : (305)675-5944

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

Email Address: \_\_\_\_\_

**FLORIDA PROFIT/NON PROFIT CORPORATION**  
**STEP UP BEHAVIORAL THERAPY CENTER, CORP.**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

RECEIVED  
 17 JUN 26 PM 4:34  
 DIVISION OF CORPORATIONS  
 BUREAU OF COMMERCIAL  
 INFORMATION SERVICES

17 JUN 26 PM 12:15

Electronic Filing Menu

Corporate Filing Menu

Help

D O'KEEFE

JUN 27 2017

H17000168854

**ARTICLES OF INCORPORATION***In compliance with Chapter 607 (Profit)***ARTICLE I NAME:** The name of the corporation is:Step up Behavioral Therapy Center, Corp.**ARTICLE II PRINCIPAL OFFICE:**

The principal street address and mailing address is:

890 SW 154 path  
Miami FL 33194**ARTICLE III SHARES:** The number of shares of stock is: 100**ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:**Yanely Casanueva (P)  
Nelida Moreira Salgado (VP)**ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:**

The name and Florida street address (PO Box not acceptable) of the registered agent is:

Yanely Casanueva  
890 SW 154 path  
Miami FL 33194**ARTICLE VI INCORPORATOR:** The name and address of the Incorporator is:Yanely Casanueva  
890 SW 154 path  
Miami FL 33194

H17000168854

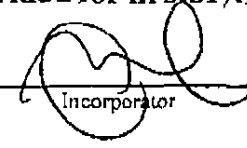
H17000168854

**Required Signatures:**

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

  
\_\_\_\_\_  
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 for in s.817.155, F.S.

  
\_\_\_\_\_  
Incorporator\_\_\_\_\_  
Date17 JUN 25 PM 12:16  
H17000168854

H17000168854