

P17000078474

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

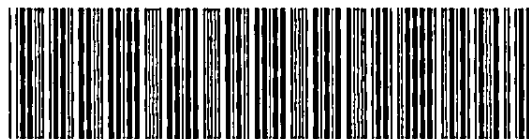
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700303403467

09/28/17--01020--002 **67.50

FILED
17 SEP 28 AM 11:01
RECEIVED
ATLANTA, GA
FBI

SEP 29 2017

K. Brumbley

COVER LETTER

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

SUBJECT: Best Children's behavior better Future, 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: Moriley Rodriguez
Name (Printed or typed)

50 SW 57 Ct
Address

Miami, FL 33144
City, State & Zip

(305) 321-1340
Daytime Telephone number

bestbehavior7@gmail.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: Best children's behavior better Future, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

50 Sw 57 CT
Miami, FL 33144.

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: _____

Professional corporation.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Moriley Rodriguez Name and Title: _____

Address: President Address: _____

50sw 57 CT
Miami, FL 33144

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

FILED
17 SEP 28 AM 11:01
CLERK OF CIRCUIT
JAIL HASSEY, FLORIDA

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: Brigitte Vendrell

Address: B. 3923 SW 39 Ave
Miami, FL 33144.

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: Norilay Rodriguez

Address: 50 SW 57 CT
Miami, FL 33144.

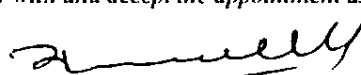
ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

9/23/17.
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.


Required Signature/Incorporator

9/23/17
Date