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SUBJECT: PEDIATRIC ABA 3 INC
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Tyrone Scott
Regulatory Specialist II
New Filings Section

FAX Aud. #: H18000083261
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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 I – NAME

The name of the corporation shall be:

PEDIATRIC ABA 3 INC

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TALLAHASSEE, FLORIDA

ARTICEE II – PRINCIPAL OFFICE

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

3011-2 POWELL ROAD STE 3-A
TALLAHASSEE, FL 32308

ARTICLE III – SHARES

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

FIVE HUNDRED (500) SHARES OF ONE DOLLAR ($1.00) PAR VALUE COMMON STOCK

ARTICLE IV – INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

WANDY CACERES
3011-2 POWELL ROAD STE 3-A
TALLAHASSEE, FL 32308

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ARTICLE V –INCORPORATOR(S)

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

WANDY CACERES 16401 SW 72ND TERRACE MIAMI, FL 33193
CARLOS PORTELA 8349 BELLA GROVE CIR UNIT 302 SARASOTA, FL 34243

Signature

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ARTICLE VI – DIRECTOR(S)

The name, title and address of the office(s) of this corporation shall be:

(President) WANDY CACERES 16401 SW 72ND TERRACE MIAMI, FL 33193

(Vice-President) CARLOS PORTELA 8349 BELLA GROVE CIR UNIT 302 SARASOTA, FL 34243

(Secretary) WANDY CACERES 16401 SW 72ND TERRACE MIAMI, FL 33193

(Treasurer) CARLOS PORTELA 8349 BELLA GROVE CIR UNIT 302 SARASOTA, FL 34243

(Director) WANDY CACERES 16401 SW 72ND TERRACE MIAMI, FL 33193
CARLOS PORTELA 8349 BELLA GROVE CIR UNIT 302 SARASOTA, FL 34243

CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THE ARTICLES OF INCORPORATION, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AND AGREE TO ACT IN THIS CAPACITY. I FURTHUR 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 REGESTERED AGENT.

DATE: 03/08/18

Registered Agent Signature
WANDY CACERES

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