

P18000092589

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.

((H18000323968 3)))



H180003239683ABC7

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 : FASTKIT CORP  
Account Number : 120100000009  
Phone : (305) 599-0839  
Fax Number : (305) 592-9391

\*\*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  
DYNAMIC CHILDREN'S BEHAVIOR THERAPY CORP

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$78.75

Electronic Filing Menu

Corporate Filing Menu

Help

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

18 NOV - 9 PM 12:39

**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: DYNAMIC CHILDREN'S BEHAVIOR THERAPY CORP

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

1634 W 74TH ST

1634 W 74TH ST

HIALEAH, FL 33014

HIALEAH, FL 33014

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: CHILDREN'S BEHAVIOR THERAPY

**ARTICLE IV SHARES**

The number of shares of stock is: 100 SHARES

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: RAFAEL DIAZ ALVAREZ

Name and Title: \_\_\_\_\_

Address: 1634 W 74TH ST

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

HIALEAH, FL 33014

PRESIDENT

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

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

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

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

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

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

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: RAFAEL DIAZ ALVAREZ  
Address: 1634 W 74TH ST  
HIALEAH, FL 33014

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: RAFAEL DIAZ ALVAREZ  
Address: 1634 W 74TH ST  
HIALEAH, FL 33014

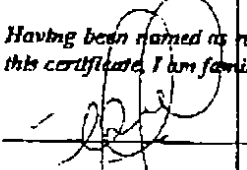
**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: NOVEMBER 09, 2018 (OPTIONAL)

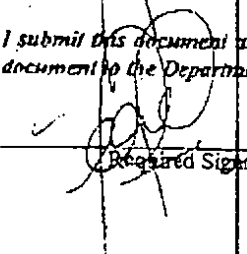
(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

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 as the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity.*

 \_\_\_\_\_ 11/09/2018  
Required Signature/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.*

 \_\_\_\_\_ 11/09/2018  
Required Signature/Incorporator Date

## FAX COVER SHEET

TO

COMPANY

FAX NUMBER 18506176381

FROM Alexis Gregor

DATE 2018-11-09 15:05:11 CST

RE Naked Straw Inc FL Formation

COVER MESSAGE