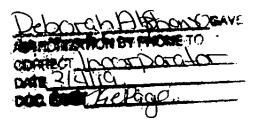
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FLORIDA DEPARTMENT OF STATE Division of Corporations

January 29, 2019

DEBORAH ALPHONSO 710 SW JACOBY AVE PORT ST LUCIE, FL 34953

SUBJECT: DEBBIEAS SUPPORT Ref. Number: W1900000021

We have received your document for DEBBIEAS SUPPORT and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

A corporation may not serve as its own incorporator. Please designate the individual whose typed signature appears on the signature line.

Please return 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.

Keyna E Page Regulatory Specialist II

Letter Number: 519A00002016

www.sunbiz.org



FLORIDA DEPARTMENT OF STATE Division of Corporations

January 16, 2019

DEBORAH ALPHONSO 710 SW JACOBY AVE PORT ST LUCIE, FL 34953

SUBJECT: DEBBIEAS SUPPORT Ref. Number: W19000000021

We have received your document for DEBBIEAS SUPPORT and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

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

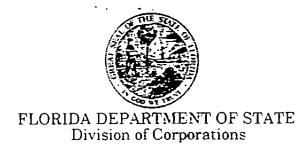
If you have any questions concerning the filing of your document, please call (850) 245-6052.

Keyna E Page Regulatory Specialist II 2019 J.1.1.2.3 F.1. (1. 10. 2)

www.sunbiz.org

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Letter Number: 519A00001212



January 2, 2019

DEBORAH ALPHONSO 710 SW JACOBY AVE PORT ST LUCIE, FL 34953

SUBJECT: DEBBIEAS SUPPORT Ref. Number: W19000000021

We have received your document for DEBBIEAS SUPPORT and your check(s) totaling S87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

Please return 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.

Keyna E Page Regulatory Specialist II

Letter Number: 819A00000002

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

The name of the corpora	tion shall be: Debbiecs	Support	-, Inc.
ARTICLE II PRINC	<u>CIPAL OFFICE</u> Principal <u>street</u> address	↓ 0	Mailing address, if different is:
710 SW	i		
Port Sant	Lucie, JFL 34953	·	
ARTICLE III PURPO The purpose for which to	OSE the corporation is organized is:	vide.	Support
Courdinat	ion to indivi	auals (egistered'
WITH AC	gency for Pers	ons wit	h Disubilities
	stock is: 100 ALOFFICERS AND/OR DIRECTORS e: Christopher Alphiny 710 SW Jacoby Ave	Name and Title:	VICE President
	Port St. Lucie FU 34953		
Name and Title	: David Alphonso		Director
Address	710 SW Jacoby Av Port St. Lucie / FC 34953		19 F
Name and Title		_ Name and Title:	
Address		Address:	7 1 3 8 1 3 8 1 1 3 8 1 1 1 1 1 1 1 1 1 1

Name and Title:	Name and Title:				
Address	Address:				
					
ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) or	if the registered agent is:				
•	_				
Address: 710 SW Jacob, Ave	19 n				
Name: Deborah Alphonso Address: 710 SW Jacob, Ave Port Sais Lucie FL	34953				
	(g- , 中)				
<u>ARTICLE VII INCORPORATOR</u>					
The <u>name and address</u> of the Incorporator is:					
Name: Deboroh Alphonso	52. 8				
Address: 710 SW Jacoby Ave	_				
Name: Deborah Alphonso Address: 710 SW Jacoby Ave Port St. Lucie, Fl 3	4953				
ARTICLE VIII EFFECTIVE DATE: Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot filing.)	. (OPTIONAL) ot be more than five days prior or 90 days after the				
Note: If the date inserted in this block does not meet the applicable the document's effective date on the Department of State's records.	statutory filing requirements, this date will not be listed as				
Having been named as registered agent to accept service of proces this certificate. I am familiar with and accept the appointment as re					
Nell A	1/12/19				
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.					
All A	1/12/19				
Required Signature/Incorporator	Dale				
y					