

**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.

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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  
ACA & BEHAVIOR CORP**

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

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 2020 JAN 17 PM 3:07  
 DIVISION OF CORPORATIONS  
 FLORIDA DEPARTMENT OF STATE  
 TALLAHASSEE, FL  
 2020 JAN 17 PM 12:19  
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**ARTICLES OF INCORPORATION**

In compliance with Chapter 607 (Profit)

**ARTICLE I NAME:** The name of the corporation is:ACA & BEHAVIOR CORP**ARTICLE II PRINCIPAL OFFICE:**

The principal street address and mailing address is:

26720 SW 142ND AVE APT #104  
HOMESTEAD, FL, 33032-5404**ARTICLE III SHARES:** The number of shares of stock is: 100**ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:**ARLETTYS FERNANDEZ FERRER (P)**ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:**

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


ARLETTYS Fernandez ferrer  
26720 Sw 142nd Ave Apt #104  
Homestead, FL 33032-5404**ARTICLE VI INCORPORATOR:** The name and address of the Incorporator is:ARLETTYS Fernandez ferrer  
26720 Sw 142nd Ave Apt #104  
Homestead FL 33032-5404SECRETARY OF STATE  
TALLAHASSEE, FL

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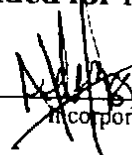
**Required Signatures:**

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

1/17/2020  
\_\_\_\_\_  
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

1/17/2020  
\_\_\_\_\_  
Date

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