Florida Department of State

Division of Corporations
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Division of Corporations

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From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : 120000000019
Phone : (305)552-5973
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DISSOLUTION OR WITHDRAWAL BMF BEHAVIOR SERVICES CORP

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ARTICLES OF DISSOLUTION

Pursuant to section 607.1403, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

FIRST:	The name of the corporation as currently filed with the Florida Department of State:	
	BMF Behavior Services corp	
SECOND:	The document number of the corporation (if known): P20000018492	
THIRD:	The date dissolution was authorized: 4-23-24	
	Effective date of dissolution if applicable:	
	(no more than 90 days after dissolution file date) Note: If the date inserted in this block does not meet the applicable stantory filing requirements, this date will not be listed as the document's effective date on the Department of State's record:	
FOURTH:	Dissolution was approved by the shareholders, in the manner required by this chapter and the articles of incorporation.	
Signature: (By a director, presidem or other of box - if directors or officers have not been a do ::rd, by		
	an incomposator - if in the lagues of a receiver, trustee, or other court appointed fi has any, by that fiduciary)	
	Gretel Harrero Fragas (Typed or printed same of person signing)	
	President	
(Title of person signing)		

02/28/2020 14:35 3052201440 LAZARUS CORPORATE PAGE 82/83 ARTICLES OF INCORPORATION In compliance with Chapter 607 (Profit) NAME: The name of the corporation is: BHF Behavior Services ARTICLE II PRINCIPAL OFFICE: The principal street address and majling address is: NW Magni Grandons FL 33055 ARTICLE III SHARES: The number of shares of stock is: ARTICLE IV INTITAL DIRECTORS AND/OR OFFICERS: ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS: The name and Florida street address (PO Box not acceptable) of the registered agent is: ARTICLE VI INCORPORATOR: The name and address of the Incorporator is:

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



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.

