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## FLORIDA PROFIT/NON PROFIT CORPORATION LEON BEHAVIOR AND COUNSELING CORP

Certificate of Status	0
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LAZARUS CORPORATE

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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 LEON BEHAVIOR AND COUNSELING CORP

ARTICLE II: PRINCIPAL OFFICE

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**EUSELIS LEON** 

18936 NW 57 AVE STE 202 HIALEAH FL 33015

ARTICLE III: SHARES

**EUSELIS LEON** 

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 100 shares value of \$1.00

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## ARTICLE IV; INITIAL REGISTERED AGENT AND STREET ADDRESS.

EUSELIS LEON 18936 NW 57 AVE STE 202 HIALEAH FL 33015

ARTICLE V: INCORPORATORS

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

**EUSELIS LEON** 

18936 NW 57 AVE STE 202

HIALBAH FL 33015

The undersigned incorporator(s) has(have) executed these Articles of Incorporation

EUSELIS LEON

PRESIDENT, VICEPRESIDENT TREASURER, SECRETARY

01.01.2014 00:00

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## CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provision of the sections 607.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

- 1-The name of the corporation is:

  LEON BEHAVIOR AND COUNSELING CORP
- 2-The name and address of the registered agent and office name is: EUSELIS LEON

18936 NW 57 AVE STE 202

P.O. Box not acceptable HIALEAH FL 33015

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and that I am familiar with and accept the obligations of my position as registered agent.

DATE

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