

4/1/2021

P 210000029945

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850)617-6381

From:

Account Name : MEDICAL BILLING CONSULTANTS, INC.
Account Number : I20200000206
Phone : (305)463-6690
Fax Number : (305)463-6693

****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

Blue Sea Behavior Therapy Corp

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$70.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
21 APR -1 AM 10:07

RECEIVED
2021 APR -1 PM 3:00
DIVISION OF CORPORATIONS
SECRETARY OF STATE

Electronic Filing Menu

Corporate Filing Menu

Help

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

ARTICLE I NAMEThe name of the corporation shall be: Blue Sea Behavior Therapy Corp**ARTICLE II PRINCIPAL OFFICE**Principal street address
2001 Palm Beach Lakes Blvd
Suite 502 H
West Palm Beach, FL 33409

Mailing address, if different is:

ARTICLE III PURPOSEThe purpose for which the corporation is organized is: Any and all Lawful Business**ARTICLE IV SHARES**The number of shares of stock is: 2**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: Arecelys Machado Santos / PName and Title: Blanca I. Zayas Fernandez / VPAddress: 2001 Palm Beach Lakes BlvdAddress: 2001 Palm Beach Lakes BlvdSuite 502 HSuite 502 HWest Palm Beach, FL 33409West Palm Beach, FL 33409

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

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CLERK OF DISTRICT COURT
JUDICIAL CIRCUIT IN AND FOR THE 13TH JUDICIAL CIRCUIT
21 APR - 1 AM 10:07

Name and Title: _____ Name and Title: _____
Address: _____ Address: _____

ARTICLE VI REGISTERED AGENTThe name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Aracelys Machado
Address: 2001 Palm Beach Lakes Blvd, Ste 502H
West Palm Beach, FL 33409

ARTICLE VII INCORPORATORThe name and address of the Incorporator is:

Name: Aracelys Machado
Address: 2001 Palm Beach Lakes Blvd, Ste 502H
West Palm Beach, FL 33409

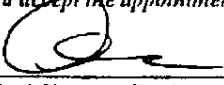
ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (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.)

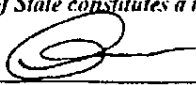
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Having been named as registered agent to accept service of process for the above stated corporation 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



Required Signature/Registered Agent04/01/2021
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.



Required Signature/Incorporator04/01/2021
Date

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