

**P2100030651**

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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

From: Account Name : LEGALZOOM.COM INC.  
Account Number : I20010000062  
Phone : (323)962-8600  
Fax Number : (323)962-3889

**\*\*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**  
**Brighter Life Psychiatry P.A.**

Certificate of Status	0
Certified Copy	1
Page Count	05
Estimated Charge	\$78.75

Electronic Filing Menu

Corporate Filing Menu

Help

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JANIS  
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COVER LETTER

Department of State  
New Filing Section  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

SUBJECT: Brighter Life Psychiatry P.A.  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00      ☐ \$78.75  
Filing Fee      Filing Fee  
                         & Certificate of Status

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED	

FROM: Cheyenne Moseley, Legalzoom.com, Inc.  
Name (Printed or typed)

101 N. Brand Blvd., 11th Floor  
Address

Glendale, CA 91203  
City, State & Zip

323-962-8600 ext. 7625  
Daytime Telephone number

onlinefilings@Legalzoom.com  
E-mail address: (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the articles.

FILED  
2021 APR 6 PM 10:18  
TALLAHASSEE, FL

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

ARTICLE I NAME  
The name of the corporation shall be: Brighter Life Psychiatry P.A.

ARTICLE II PRINCIPAL OFFICE  
Principal street address Mailing address, if different is:  
7451 Wiles Road Suite 206  
Coral Springs, Florida 33067

ARTICLE III PURPOSE  
The purpose for which the corporation is organized is:  
Psychiatry - Licensed Advanced Practice Registered Nurse

ARTICLE IV SHARES  
The number of shares of stock is: 10000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:	Crystal Ryan Adkins, PTSD	Name and Title:	
Address	6643 NW 127th Ter Parkland FL 33076	Address:	
Name and Title:		Name and Title:	
Address		Address:	
Name and Title:		Name and Title:	
Address		Address:	

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2021 APR -6 PM 10:19  
CLL AMASSEE, FLORIDA

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: United States Corporation Agents, Inc.

Address: 5575 S Semoran Blvd. Suite 36

Orlando, Florida 32822

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Cheyenne Moseley, Legalzoom.com, Inc.

Address: 101 N. Brand Blvd., 11th Floor,

Glendale, CA 91203

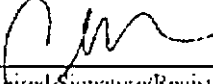
ARTICLE VIII EFFECTIVE DATE:

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*



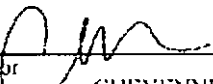
04/06/2021

Required Signature/Registered Agent

Cheyenne Moseley, Assistant Secretary,  
Legalzoom.com, Inc

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.*



04/06/2021

Required Signature/Incorporator

CHEYENNE MOSELEY, US CORP. AGENTS

Date