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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : 120000000019

: (305)552-5973

Phone

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 FEIJO ABA THERAPY SERVICE INC

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

Electronic Filing Menu

Corporate Filing Menu

Help

T. SCOTT

MAY - 3 2022

MIAMI FL 33125

ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

ARTICLE 1 NAME: The name of the corporation is:		
FEIJO ABA THERAPY SERVICE INC	:	
ARTICLE II PRINCIPAL OFFICE:		
The principal street address and mailing address is:		
3025 NW 11TH ST	· ·	
MIAMI FL 33125		
	:	
ARTICLE III SHARES: The number of shares of stock is: 100 SH	AF:ES@1	<u>.</u>
ARTICLE IV INITIAL DIRECTORS AND/OR OFFIC	210 G.	
ROBERTO C FEIJO (PRESIDENT)	;	-
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	<u>; </u>	5
The name and Florida street address (PO Box not acceptable) of the regis		
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ROBERTO C FENO	:	-
3025 NW 11TH-ST	<u>:</u>	-
MIAMI FL 33125	1	_
ARTICLE VI INCORPORATOR: The name and address of the In	corporator	is:
ROBERTO C FEIJO		
3025 NW 11TH ST	i	_
UULU 1111 1111 U		

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 .

04/26/2022

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

04/26/2022

Drite