

P22000089068

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H22000405756 3)))



H220004057563ABC+

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

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

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.
Account Number : I20000000019
Phone : (305)552-5973
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
ALEJO BEHAVIOR SERVICES INC

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

2022 DEC 3 2 AM 10:56

14:02:41

(Handwritten mark)

ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

EFFECTIVE DATE 1/1/2023

ARTICLE I NAME: The name of the corporation is:

Alejo Behavior Services INC

ARTICLE II PRINCIPAL OFFICE:

The principal street address and mailing address is:

1225 W 35th ST, Hialeah, FL 33012

APT 13A

ARTICLE III SHARES: The number of shares of stock is: 100

ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:

Daylen Silverio Torres (P)

ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:

The name and Florida street address (PO Box not acceptable) of the registered agent is:

Daylen Silverio Torres

1225 W 35th ST Hialeah FL 33012 APT 13 A

ARTICLE VI INCORPORATOR: The name and address of the Incorporator is:

Daylen Silverio Torres

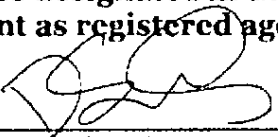
1225 W 35th ST, Hialeah FL, 33012

APT 13A

42001-0002 AM12:41

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

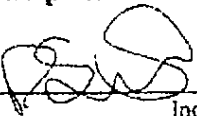


Registered Agent

11/30/2022

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

11/30/2022

Date

11/30/2022 14:12:41