

12/21/22, 9:45 AM

Division of Corporations

Florida Department of State  
Division of Corporations  
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To:

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Account Number : 104662003400  
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**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: KRH@KENHIGGINSCPA.COM

**FLORIDA PROFIT/NON PROFIT CORPORATION**  
**Faith Based Behavioral Services Inc**

Certificate of Status	1
Certified Copy	0
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D. O'KEEFE

DEC 22 2022

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**ARTICLES OF INCORPORATION**

H22000428476

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

**ARTICLE I NAME**The name of the corporation shall be: Faith Based Behavioral Services Inc**ARTICLE II PRINCIPAL OFFICE**Principal street address  
3513 S Federal Hwy Suite A  
Boynton Beach, FL 33435Mailing address, if different is:  
\_\_\_\_\_  
\_\_\_\_\_**ARTICLE III PURPOSE**The purpose for which the corporation is organized is: ANY LEGAL OR LAWFUL PURPOSE  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_**ARTICLE IV SHARES**The number of shares of stock is: 200 AT NO PAR VALUE**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: Sally Mikhail-Theiner - PRESIDENT/DIRECTOR

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

Address 3513 S Federal Hwy Suite A  
Boynton Beach, FL 33435Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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

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

Address \_\_\_\_\_

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

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

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

Address \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_FILED  
2022 DEC 21 AM 11:30  
Sally Mikhail-Theiner  
FAITH BASED BEHAVIORAL SERVICES INC

H22000428476

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H22000428476

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: Sally Mikhail-Theiner  
 Address: 3513 S Federal Hwy Suite A  
 Boynton Beach, FL 33435

**ARTICLE VII INCORPORATOR**The name and address of the Incorporator is:

Name: Sally Mikhail-Theiner  
 Address: 3513 S Federal Hwy Suite A  
 Boynton Beach, FL 33435

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**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*

DocuSigned by:  
 Sally Mikhail-Theiner  
 Required Signature/Regist: 205F83E7E8CE404... DECEMBER 20, 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.*

DocuSigned by:  
 Sally Mikhail-Theiner  
 Required Signature/Incor: 205F83E7E8CE404... DECEMBER 20, 2022  
 Date

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