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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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Division of Corporations
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Email Address: _____

**FLORIDA PROFIT/NON PROFIT CORPORATION
WESTERN PACIFIC PSYCHOLOGICAL NETWORK, INC**

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

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ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

ARTICLE I NAME: The name of the corporation is:western pacific psychological network, inc**ARTICLE II PRINCIPAL OFFICE:**

The principal street address and mailing address is:

1608 W SITKA ST
Tampa FL 33604**ARTICLE III SHARES:** The number of shares of stock is: 100**ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:**Sadiel Castellon Sanchez (P)**ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:**

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

Sadiel Castellon Sanchez
1608 W Sitka St
Tampa FL 33604**ARTICLE VI INCORPORATOR:** The name and address of the Incorporator is:Sadiel Castellon Sanchez
1608 W Sitka St
Tampa FL 336042023 SEP -7 PM 12:27
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EIN: 93 - 3278887

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

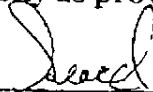


Registered Agent

09-06-2023

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

09-06-2023

Date

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