

9/15/23, 3:52 PM

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Division of Corporations

Florida Department of State
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FLORIDA PROFIT/NON PROFIT CORPORATION
ESPERANZA BEHAVIOR THERAPY INC

Certificate of Status	0
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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: ESPERANZA BEHAVIOR THERAPY INC

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

1544 NORMANDY DR MIAMI BEACH, FL 33141

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: _____

ANY AND ALL LAWFUL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: MARIA ESPERANZA LOPATEGUI-CABEZAS (P) Name and Title: _____

Address 1544 NORMANDY DR MIAMI BEACH, FL 33141 Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

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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: MARIA ESPERANZA LOPATEGUI-CABEZAS
 Address: 1544 NORMANDY DR MIAMI BEACH, FL 33141

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ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: MARIA ESPERANZA LOPATEGUI-CABEZAS
 Address: 1544 NORMANDY DR MIAMI BEACH, FL 33141


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


Maria Esperanza Lopategui Cabezas (Sep 15, 2023 15:21 EDT) 9-15-2023
 Required Signature/Registered Agent 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.


Maria Esperanza Lopategui Cabezas (Sep 15, 2023 15:21 EDT) 9-15-2023
 Required Signature/Incorporator Date