# **Electronic Articles of Incorporation For**

P23000075319 FILED October 23, 2023 Sec. Of State adjohnson

MYSPEECHCORNER INC

The undersigned incorporator, for the purpose of forming a Florida profit corporation, hereby adopts the following Articles of Incorporation:

# Article I

The name of the corporation is: MYSPEECHCORNER INC

# **Article II**

The principal place of business address:

15273 SKY POND PASS DELRAY BEACH, FL. UN 33446

The mailing address of the corporation is:

15273 SKY POND PASS DELRAY BEACH, FL. UN 33446

## Article III

The purpose for which this corporation is organized is:

ANY AND ALL LAWFUL BUSINESS. MY BUSINESS AS A SPEECH PATHOLOGIST IS TO SERVICE AND SUPPORT CHILDREN WITH SPEECH AND LANGUAGE ISSUES THAT MAY EFFECT THEIR DAILY LIFE. FROM ASSESSMENT TO DAILY TREATMENT

#### Article IV

The number of shares the corporation is authorized to issue is: 100

## Article V

The name and Florida street address of the registered agent is:

LEE E MILLER 15273 SKY POND PASS DELRAY BEACH, FL. 33446

I certify that I am familiar with and accept the responsibilities of registered agent.

Registered Agent Signature: LEE MILLER

# **Article VI**

The name and address of the incorporator is:

LEE MILLER 15273 SKY POND PASS

DELRAY BEACH, FL 33446

Electronic Signature of Incorporator: LEE MILLER

I am the incorporator submitting these Articles of Incorporation and affirm that the facts stated herein are true. I am aware that 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. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of this corporation and every year thereafter to maintain "active" status.

## **Article VII**

The initial officer(s) and/or director(s) of the corporation is/are:

Title: P LEE E MILLER 15273 SKY POND PASS DELRAY BEACH, FL. 33446 UN

## **Article VIII**

The effective date for this corporation shall be:

10/23/2023

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