

Florida Department of State

Division of Corporations

Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6381

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Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

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FLORIDA PROFIT/NON PROFIT CORPORATION
B1A BEHAVIOR SERVICES INC.

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

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FLORIDA DEPARTMENT OF STATE
 DIVISION OF CORPORATIONS
 ELECTRONIC FILING SERVICE

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MS

ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

ARTICLE I NAME: The name of the corporation is:B1A Behavior Services INC.**ARTICLE II PRINCIPAL OFFICE:**

The principal street address and mailing address is:

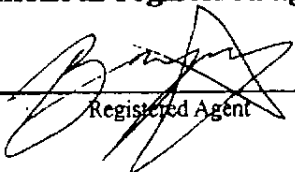
3813 SW 156th Ct, Miami, FL
33185**ARTICLE III SHARES:** The number of shares of stock is: 100**ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:**Bryan Anthony Hidalgo - P**ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:**

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

Bryan Anthony Hidalgo
3813 SW 156th Ct, Miami, FL 33185**ARTICLE VI INCORPORATOR:** The name and address of the Incorporator is:Bryan Anthony Hidalgo
3813 SW 156th Ct, Miami, FL 33185

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 _____ 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 _____ Date _____