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To:

From:

Division of Corporations

Fax Number : (850)617-6381

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : I2000000019 Phone : (305)552-5973 Fax Number : (305)675-5944

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

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FLORIDA PROFIT/NON PROFIT CORPORATION BIG STEPS BEHAVIOR SERVICES CORP

Certificate of Status	0
Certified Copy	1
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Help

14

2025 APR 28 PM 3: 52

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ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

ARTICLE I	NAME:	The name of	the corpor	ation is	:
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319 Steps Behavior Services Corp ARTICLE II PRINCIPAL OFFICE:	<u> </u>
The principal street address and mailing address is:	
16073 SW 68th Terrace	
Miami FC 33193	
ARTICLE III SHARES: The number of shares of stock is:	<u>() </u>
ARTICLE IV INITIAL DIRECTORS AND/OR OFFIC	
Diego Antonio Torres (P)	<u></u>
	20
	- en
	رخ دخ
	<u> </u>
The name and Florida street address (PO Box not acceptable) of the region of the regio	
Stego ANIONIO ETTES	151 22102
16073 SW 68th Terrace, Miami,	<u>PC 33193</u>
	ton ig:
ARTICLE VI INCORPORATOR: The name and address of the I	
Diego Antonio Torres 16073 SW 68th Terrace, Miami	'F1 0910
160 73 SW 68th lerrace Mami	1 TU 3214

EIN: 33-4819972

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 St /28/1025

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 \$.877.155, F.S.

Incorporator