

P97000013739

TRANSMITTAL LETTER

Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

FILED
97 FEB 10 PM 12:29
TALLAHASSEE, FLORIDA

SUBJECT: Kids In Touch Therapy Services, P.A.
(Proposed corporate name - must include suffix)

000002088030--8
-02/14/97-01056--007
*****78.75 *****78.75

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

☐ \$70.00
Filing Fee

☒ \$78.75
Filing Fee
& Certificate

☐ \$122.50
Filing Fee
& Certified Copy

☐ \$131.25
Filing Fee,
Certified Copy
& Certificate

ADDITIONAL COPY REQUIRED

FROM: Mitchell Gerstein, CPA
Name (Printed or typed)

W97-2298

1700 Walnut Street - 2nd Floor
Address

Philadelphia, PA 19103
City, State & Zip

(215) 732-5218
Daytime Telephone number

NOTE: Please provide the original and one copy of the articles.

2-12-97



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham
Secretary of State

January 30, 1997

MITCHELL GERSTEIN, CPA
1700 WALNUT STREET
2ND FLOOR
PHILADELPHIA, PA 19103

SUBJECT: KIDS IN TOUCH THERAPY SERVICES, P.A.
Ref. Number: W97000002298

We have received your document for KIDS IN TOUCH THERAPY SERVICES, P.A. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please sign and return your check, along with a copy of this letter to ensure your check is properly credited.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6927.

Kathy Hyman
Document Specialist

Letter Number: 097A00004835

ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be: Kids In Touch Therapy Services, P.A.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

330 N.W. 36th Court
Boca Raton, FL 33431

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

One Hundred Shares

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Lisa Blatt
330 N.W. 36th Court
Boca Raton, FL 33431

97 FEB 10 PM 12:29
FILED
SECRET
TALLAHASSEE

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

Mitchell Gerstein
1700 Walnut Street - 2nd Floor
Phialdelphia, PA 19103

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

Six day of January, 19 97.

(An additional article must be added if an effective date is requested.)



Signature

Signature

Signature

Notarization is not required

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

Article VI

The corporation will provide therapy services in the state of Florida.

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is Kids In Touch Therapy Services, P.A.

2. The name and address of the registered agent and office is:

Lisa Blatt

(NAME)

330 N.W. 36th Court

(P. O. Box or Mail Drop Box **NOT** ACCEPTABLE)

Boca Raton, FL 33431

(CITY/STATE/ZIP)

FILED
97 FEB 10 PM 12:29
TALLAHASSEE, FLORIDA

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Lisa Blatt

(SIGNATURE)

1/20/97

(DATE)