

P97000030789

TRANSMITTAL LETTER

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

Bruce G. Borkosky, Psy.D., P.A.

SUBJECT: _____

(Proposed corporate name - must include suffix)

700002117627--9
-03/19/97-01024--012
*****70.00 *****70.00

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: Dr. Bruce G. Borkosky
Name (Printed or typed)

6209 Country Fair Circle
Address

Boynton Beach, FL 334377
City, State & Zip

1-800-881-0141

Daytime Telephone number

Dr. Borkosky's wife GAVE

AUTHORIZATION BY PHONE TO

CORRECT art IV + add purpose

DATE 4-4-97

DOC. EXAM. BR

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

789,612, 630, 671
797-6835

B. REGISTER MAR 25 1997

FILED
97 APR -4 AM 10:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham
Secretary of State

March 25, 1997

DR BRUCE G BORKOSKY
6209 COUNTRY FAIR CIR
BOYNTON BEACH, FL 33437

SUBJECT: BRUCE G. BORKOSKY, PSY.D., P.A.
Ref. Number: W97000006835

We have received your document for **BRUCE G. BORKOSKY, PSY.D., P.A.** and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent and registered office listed in your articles of incorporation must be consistent throughout the document.

The specific nature of business of the professional association must be stated in the document.

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) 487-6919.

Beth Register
Corporate Specialist Supervisor

Letter Number: 297A00014956

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:

Bruce G. Borkosky, Psy.D., P.A. Providing the services of
a Psychologist.

ARTICLE II PRINCIPAL OFFICE

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

10 S.E. 1st Avenue (2nd Floor)

Delray Beach, FL 33444

FILED
97 APR -4 AM 10:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE III SHARES

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

Five hundred (500) shares, having a par value of one dollar (\$1.00)
per share.

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Dr. Bruce G. Borkosky
10 SE 1st Ave (2nd floor)
Delray Beach, FL 33444

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):

Dr. Bruce G. Borkosky, President
6209 Country Fair Circle
Boynton Beach, FL 33437

Nancy J. Stewart-Borkosky, Secretary
6209 Country Fair Circle
Boynton Beach, FL 33437

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

1st day of March, 19 97.

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

B. G. Borkosky, D.P.A.
Signature

Nancy Stewart-Borkosky (NJB)
Signature

Signature

Notarization is not required

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

**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 Bruce G. Borkosky, Psy.D., P.A.

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

Dr. Bruce G. Borkosky

(NAME)

10 S.E. 1st Avenue (2nd floor)

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

Delray Beach, FL 33444

(CITY/STATE/ZIP)

FILED
91 APR -4 AM 10:14B
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

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.

B. G. Borkosky, Psy.D., P.A.
(SIGNATURE)

3-12-97
(DATE)