

997000067924

SHERON A. CLARKE
2121 NW 63 AVE.
FLEMING PARK, FL 33024

City/State/Zip

Phone #

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. _____
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

- ☐ Walk in ☐ Pick up time _____ ☐ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

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****122.50 ****122.50

FILED
97 AUG -4 AM 10:53
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

T.M. - 8/6/97

ARTICLES OF INCORPORATION

FILED
97 AUG -4 AM 10:53
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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: **STONEY-BROOKE COMMUNITY MENTAL HEALTH CENTER, INC.**

ARTICLE II PRINCIPAL OFFICE

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

**141 SW 97 Terrace
Pembroke Pines, Fl. 33025.**

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 100

Sharon Clarke	50
Jessica Perkins-Mcleod	50

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Sharon Clarke

2121 NW 93 Avenue
Pembroke Pines, Fl. 33024

ARTICLE V INCORPORATOR(S)

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

Sharon Clarke 2121 NW 93 Avenue Pembroke Pines , Fl. 33024.
Jessica Perkins-Mcleod 141 SW 97 Terrace Pembroke Pines, Fl. 33025.

The undersigned incorporator(s) has (have) executed these Articles of Incorporation this 29th day of July, 1997.

Sharon Clarke

Signature

Jess Perkins-Mcleod

Signature

Signature

Sworn to and subscribed to me this 29th day of July, 1997.

DV Marsh

Notary Public

DV MARSH



OFFICIAL NOTARY SEAL
DV MARSH
COMMISSION NO. 00050330
MY COMMISSION EXPIRES JUNE 21, 2000

**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: **STONEY-BROOKE COMMUNITY MENTAL HEALTH CENTER, INC.**

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

Sharon Clarke

2121 NW 93 Avenue

Pembroke Pines, Fl. 33024.

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 and accept the obligations of my position as registered agent.

✓ Sharon Clarke
Signature

7/30/97
Date

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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA