

TRANSMITTAL LETTER

P98000085369

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

400002654354--2
-10/02/98-01057-002
*****70.00 *****70.00

SUBJECT: LISA BURTON, ARNP, MSN, CS, PA
(Proposed corporate name - must include suffix)

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: LISA BURTON, ARNP, MSN, CS, PA
Name (Printed or typed)

7800 SW 87 Avenue Suite B250
Address

MIAMI FL 33123
City, State & Zip

(305) 225-0143
Daytime Telephone number

AUTHORIZATION BY PHONE TO
CORRECT art 5.16
DATE 10/6/98
DOC. EXAM TA

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

98 OCT -2 AM 9:08

FILED

Lisa says
one of these
is definitely the original. - Purpose of
per B.R.

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

TA-10/6/98

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

LISA BURTON, ARNP, MSN, CS, PA

ARTICLE II PRINCIPAL OFFICE

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

7800 SW 87 Avenue Suite B250
MIAMI, FL 33173

ARTICLE III SHARES

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

100 shares

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

LISA BURTON
7800 SW 87 Avenue #B250 MIAMI, FL 33173

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

LISA BURTON
7800 SW 87 Avenue Suite B250
MIAMI, FL 33173

Lisa Burton

Signature/Incorporator

9/21/98

Date

ARTICLE VI PURPOSE - The specific purpose will be the Practice of Nursing and Mental Health Counseling.

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

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 Burton

Signature/Registered Agent

9/21/98

Date

FILED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA