



0005376567



**STATE OF IDAHO**  
*Office of the secretary of state, Phil McGrane*  
**FOREIGN REGISTRATION STATEMENT (BUSINESS CORPORATION)**

Idaho Secretary of State  
PO Box 83720  
Boise, ID 83720-0080  
(208) 334-2301  
Filing Fee: \$100.00

*For Office Use Only*

**-FILED-**

File #: 0005376567

Date Filed: 8/31/2023 4:48:25 PM

Filing Fee							
Selected Service Type: Expedited (+\$40; filing fee \$140)							
1. The name this business corporation will use in Idaho is:							
Type of Corporation	Foreign Professional Business Corporation						
Entity name	MENTAL HEALTH SPECIALTY GROUP, P.A.						
The name of the business corporation in its home jurisdiction as shown on the attached certificate of existence/good standing: MENTAL HEALTH SPECIALTY GROUP, P.A.							
Upload or Mail a one page PDF of a Certificate of Existence/Good Standing from the home jurisdiction dated within 90 days of today.							
Profession							
The business is organized to practice the profession of:	Medicine						
2. Home Jurisdiction							
The jurisdiction of formation is:	FLORIDA						
3. The street address of its domestic principal office (if required by the laws of the jurisdiction of formation) is:							
Street Address	None						
4. The mailing address of its domestic principal office (if required by the laws of the jurisdiction of formation) is:							
Mailing Address	None						
5. The complete street address of the principal office is:							
Principal Office Address	500 WESTOVER DRIVE #13619 SANFORD, NC 27330						
6. The mailing address of the principal office is:							
Mailing Address	500 WESTOVER DRIVE #13619 SANFORD, NC 27330						
7. Registered Agent Name and Address							
Registered Agent	CORPORATION SERVICE COMPANY Commercial Registered Agent Physical Address 1305 12TH AVE RD NAMPA, ID 83686 Mailing Address 1305 12TH AVE RD NAMPA, ID 83686						
<input checked="" type="checkbox"/> I affirm that the registered agent appointed has consented to serve as registered agent for this entity.							
8. Governors							
<table border="1"> <thead> <tr> <th>Name</th> <th>Title</th> <th>Address</th> </tr> </thead> <tbody> <tr> <td>AVI FACTOR</td> <td>PRESIDENT</td> <td>500 WESTOVER DRIVE #13619 SANFORD, NC 27330</td> </tr> </tbody> </table>		Name	Title	Address	AVI FACTOR	PRESIDENT	500 WESTOVER DRIVE #13619 SANFORD, NC 27330
Name	Title	Address					
AVI FACTOR	PRESIDENT	500 WESTOVER DRIVE #13619 SANFORD, NC 27330					

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Signature of individual authorized by the entity to sign:

*avi factor*

Sign Here

*08/31/2023*

Date

Job Title: PRESIDENT

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# State of Florida Department of State

I certify from the records of this office that MENTAL HEALTH SPECIALTY GROUP, P.A. is a corporation organized under the laws of the State of Florida, filed on March 2, 2021.

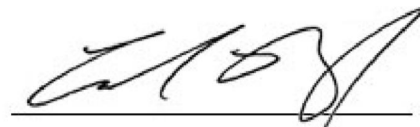
The document number of this corporation is P21000019120.

I further certify that said corporation has paid all fees due this office through December 31, 2023, that its most recent annual report/uniform business report was filed on July 25, 2023, and that its status is active.

I further certify that said corporation has not filed Articles of Dissolution.

*Given under my hand and the  
Great Seal of the State of Florida  
at Tallahassee, the Capital, this  
the Twenty-fifth day of July, 2023*



  
Secretary of State

Tracking Number: 5878967056CC

To authenticate this certificate, visit the following site, enter this number, and then follow the instructions displayed.

<https://services.sunbiz.org/Filings/CertificateOfStatus/CertificateAuthentication>