P0300079073

(Requestor's Name)
(Address)
, ,
(Address)
(City (Chata III), (Dhana 10)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
VICTOR GAVE
AUTHORIZATION BY PHONE TO
correct aut. IV
DATE 717
1000. EXAM. 16M

Office Use Only

800021514078

07/17/03--01012--008 **78.75

FILED

03 JUL 17 PH 5: 52

SECRETARY OF STATE

Pom 7/17

TRANSMITTAL LETTER

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

SUBJECT: PINE	CREST CHIROPRACTIC P	.A.		
	(PROPOSED CORPORA)	TE NAME – MUST INCL	UDE SUFFIX)	
Enclosed are an orig	inal and one (1) copy of the artic	cles of incorporation and	a check for:	
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	& Certificate of Status	
FROM:				
		132ND PLACE	AAA	
	MIAMI, FLORIDA 33186 City, State & Zip			
-	· · · · · · · · · · · · · · · · · · ·	25-6894		

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

A DITTOL TO OF THEODER A PLOT					
ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621,	E C (Dec Gt)	-			
in compnance with Chapter 607 and/or Chapter 621,	r.s. (rioiii)				
ARTICLE I NAME		· et			
The name of the corporation shall be:					
PINECREST CHIROPRACTIC P. A.					
ARTICLE II PRINCIPAL OFFICE					
The principal place of business/mailing address is:		-			
11118-4 S.W. 132ND PLACE	-				
MIAMI, FL 33186	_				
ARTICLE III PURPOSE					
The purpose for which the corporation is organized is	- 				
CHIROPRACTIC CARE					
ormer rotorio orace					
ARTICLE IV SHARES					
The number of shares of stock is:	<u></u>				
100					
ARTICLE V INITIAL OFFICERS AND/OR	DIRECTORS				
List name(s), address(es) and specific title(s):			='/0	0	
DR. VICTOR ESTEVEZ, PRESIDENT 11118-4 SW 132ND PLACE			ALC ALC	၀	
MIAMI, FL 33186			≥辯	Ţ	
			N Z	<i>-</i> =	
YAMILET ESTEVEZ, TREASURE			SET YY	_	
ARTICLE VI REGISTERED AGENT			119	P	Ü
The name and Florida street address of the registered	agent is:	-	10.1 A.1.8	ŲŢ	-
DR. VICTOR ESTEVEZ			≘ E	52	
11118-4 SW 132ND PLACE			12-	N	
MIAMI, FL 33186	•				
ARTICLE VII INCORPORATOR					
The name and address of the Incorporator is:					
DR. VICTOR ESTEVEZ	***				
11118-4 SW 132ND PLACE					
MIAMI, FL 33186					

Having been named as registered agent to accept service of proc certificate, I am familiar with and accept the appointment as regis				gnate	a in thi
Matter 18ty	-	7	~ ^ 3	,	
VK J C V			5-03	· .	
Signature/Registered Agent	_	D	ate		
1/8/1/20	- <u></u>	ر _{جس}	، بر سسی ،		
May col	· 		2-0	<u>S</u>	
Signature/Incorporator		D	ate		