

P6000137640

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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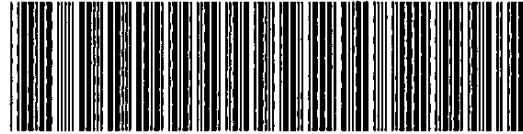
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2006 OCT 30 P 4: 22

FILED

D. Brown OCT 31 2006

COVER LETTER

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

SUBJECT: Sarasota Immediate Care, Inc.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00
Filing Fee

☒ \$78.75
Filing Fee
& Certificate of Status

☐ \$78.75
Filing Fee
& Certified Copy

☐ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: Jayne Sassano

Name (Printed or typed)

5012 Killkenney

Address

Oldsmar, Florida 34677

City, State & Zip

602-953-1742

Daytime Telephone number

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

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

FILED

ARTICLE I NAME

The name of the corporation shall be:

Sarasota Immediate Care, Inc.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

5012 Killkenney Oldsmar, Florida 34677

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

practice of medicine, healthcare, and all other lawful purposes.

ARTICLE IV SHARES

The number of shares of stock is:

1,000 voting, no-par equity, and 1,000 Non-voting, no-par equity

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

President: David J. Sassano, D.O. 5012 Killkenney Oldsmar, Fl 34677

V.P. : Jayne M. Sassano 2709 E. Victor Hugo Ave. Phoenix Az. 85032

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Jayne Sassano 5012 Killkenney Oldsmar, FL. 34677

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

David J. Sassano 5012 Killkenney Oldsmar, Fl 34677

Having been named as registered agent to accept service of process for the above stated corporation as the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent


Signature/Incorporator

10/26/06

Date
10/26/06

Date