

P/3 000101618

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

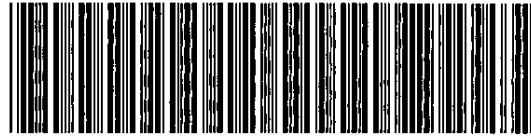
(Business Entity Name)

(Document Number)

Certified Copies Certificates of Status

Special Instructions to Filing Officer:

Office Use Only



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11/18/13--01027--014 **137.50

SECRETARY OF STATE
DIVISION OF CORPORATE AFFAIRS
13 DEC 23 AM 10:05

[Handwritten signature]
12-26-13



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 21, 2013

GAVIN E. HAMER
12917 STONE TOWER LOOP
FT. MYERS, FL 33913

SUBJECT: GAVIN E. HAMER PC
Ref. Number: W13000064584

We have received your document for GAVIN E. HAMER PC and your check(s) totaling \$137.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The only acceptable words for designation as a professional association are PROFESSIONAL ASSOCIATION, P.A., and CHARTERED.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Sylvia Gilbert
Regulatory Specialist II
New Filing Section

Letter Number: 613A00026971



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 21, 2013

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Sylvia Gilbert
Regulatory Specialist II
New Filing Section

Letter Number: 613A00026971

RECEIVED

13 DEC 11 AM 10:31

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: Transferring Business from Michigan to Florida

Enclosed is an original and one (1) copy of the Certificate of Domestication and a check for:

\$137.50

FEES:

Certificate of Domestication	\$ 50.00
Articles of Incorporation and Certified Copy	<u>\$ 78.75</u>
Total to domesticate and file	\$128.75

OPTIONAL:

Certificate of Status \$ 8.75

Gavin E Hamer

Name (printed or typed)

12917 Stone Tower Loop

Address

Ft Myers FL 33913

City, State & Zip

248-921-9171

Daytime Telephone Number

hamerpt@hotmail.com

E-mail address: (to be used for future annual report notification)

CERTIFICATE OF DOMESTICATION

SECRETARY OF STATE
DIVISION OF CORPORATIONS
13 DEC 23 AM 10:05

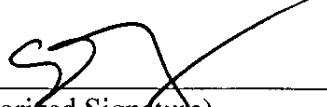
The undersigned, Gavin E Hamer, President
(Name) (Title)
of Gavin E Hamer PC 53065C a foreign corporation,
(Corporation Name)

in accordance with s. 607.1801, Florida Statutes, does hereby certify:

1. The date on which corporation was first formed was March 30, 2005.
2. The jurisdiction where the above named corporation was first formed, incorporated, or otherwise came into being was Michigan USA 53065C.
3. The name of the corporation immediately prior to the filing of this Certificate of Domestication was Gavin E Hamer PC.
4. The name of the corporation, as set forth in its articles of incorporation, to be filed pursuant to s. 607.0202 and 607.0401 with this certificate is Gavin E Hamer PC P.A. GH.
5. The jurisdiction that constituted the seat, siege social, or principal place of business or central administration of the corporation, or any other equivalent jurisdiction under applicable law, immediately before the filing of the Certificate of Domestication was Michigan USA 53065C.
6. Attached are Florida articles of incorporation to complete the domestication requirements pursuant to s. 607.1801.

I am Gavin E Hamer, of Gavin E Hamer PC P.A. GH

and am authorized to sign this Certificate of Domestication on behalf of the corporation and have done so this the 13th day of November 2013


(Authorized Signature)

Filing Fee:	
Certificate of Domestication	\$ 50.00
Articles of Incorporation and Certified Copy	\$ 78.75
Total to domesticate and file	\$128.75

ARTICLES OF INCORPORATION
IN COMPLIANCE WITH CHAPTER 607, F.S.

SECRETARY OF STATE
DIVISION OF CORPORATIONS
19 DEC 23 AM 10:05

ARTICLE I NAME

THE NAME OF THE CORPORATION SHALL BE:

Gavin E Hamer ~~PC~~ P. A. *ST*

ARTICLE II PRINCIPAL OFFICE

THE PRINCIPAL PLACE OF BUSINESS/ MAILING ADDRESS IS:

Principal Address	Mailing Address
12917 Stone Tower Loop	12917 Stone Tower Loop
<hr/>	<hr/>
Ft Myers FL 33913	Ft Myers FL 33913
<hr/>	<hr/>
<hr/>	<hr/>
<hr/>	<hr/>

ARTICLE III PURPOSE

THE PURPOSE FOR WHICH THE CORPORATION IS ORGANIZED:

To provide physical therapy services which include continuing education and clinical services.

These services are provided in the United States of America and over seas.

ARTICLE IV SHARES 100

THE NUMBER OF SHARES OF STOCK IS: _____

ARTICLE V INITIAL DIRECTORS AND/ OR OFFICERS

THE NAME(S) AND ADDRESS(ES) AND SPECIFIC TITLES:

Title/Name

President Gavin Hamer

12917 Stone Tower Loop

Ft Myers FL 33913

Title/Name

Title/Name

Title/Name

Title/Name

Title/Name

Title/Name

Title/Name

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

THE NAME AND FLORIDA STREET ADDRESS (P.O. BOX NOT ACCEPTABLE) OF THE REGISTERED AGENT IS:

Gavin E Hamer

12917 Stone Tower Loop

Ft Myers FL 33913

ARTICLE VII INCORPORATOR

THE NAME AND ADDRESS OF THE INCORPORATOR IS:

Gavin E Hamer

12917 Stone Tower Loop

Ft Myers FL 33913

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 AM FAMILIAR WITH AND ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY.

Signature/Registered Agent

12/10/13
Date:

Signature/Incorporator

12.10.13
Date

RECEIVED
13 DEC 23 PM 12: 26
SECRETARY OF STATE
TALLAHASSEE, FLORIDA