

NO6 000007969

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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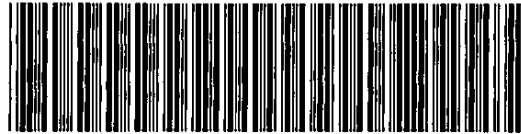
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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07/27/06--01008--015 **78.75

FILED
06 JUL 27 AM 11:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: V3 COMPRENSIVE HEALTH CENTER INC.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosure 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 of
Status

☐ \$78.75
Filing Fee
& Certified Copy

☐ \$87.50
Filing Fee,
Certified Copy
& Certificate

ADDITIONAL COPY REQUIRED

FROM: VERONIQUE JEAN-PHILIPPE
Name (Printed or typed)

1213 SATURN DRIVE
Address

NASHVILLE, TN 37217
City, State & Zip

(615)-593-2252
Daytime Telephone number

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

ARTICLES OF INCORPORATION
In Compliance with Chapter 617, F.S., (Not for Profit)

ARTICLE I NAME

The name of the corporation shall be:

VJ COMPREHENSIVE HEALTH CENTER INC.

ARTICLE II PRINCIPAL OFFICE

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

MIAMI FLORIDA 740 NW 125 ST
NORTH MIAMI, FL 33168

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Public Health care benefit.

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ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

AS stated in By-Laws. ALL assets to be given to another non profit organization upon dissolution.

ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS

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

VERONIQUE JEAN-PHILIPPE, Founder
1213 SATURN DRIVE
NASHVILLE, TN 37217

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

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

VERONIQUE JEAN-PHILIPPE
740 NW 125 ST
NORTH MIAMI, FL 33168

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

VERONIQUE JEAN-PHILIPPE
1213 SATURN DRIVE
NASHVILLE, TN 37217

Having been named as registered agent 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.

Veronique Jean-Philippe
Signature/Registered Agent

7/20/06
Date

Veronique Jean-Philippe
Signature/Incorporator

7/20/06
Date