

NO7000006757

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☒ WAIT

☐ MAIL

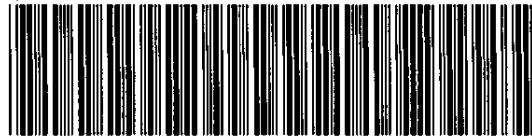
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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07 JUL 10 PM 12:23

Division of Corporations
Tallahassee, Florida

FILED

07 JUL 10 PM 12:29

SECRETARY OF STATE
Tallahassee, Florida

D. WHITE JUL 10 2007

COVER LETTER

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

SUBJECT: A Doctor's Heart, Inc.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed 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: Wesley D. Scoles MD

Name (Printed or typed)

4462 Whispering Oaks Drive

Address

Tallahassee, FL 32309

City, State & Zip

850-997-0707

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)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:
A Doctor's Heart Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:
4462 Whispering Oaks Drive Tallahassee, FL 32309

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

The organization is organized exclusively for charitable, religious, educational purposes under Section 501(c)(3) of the Internal Revenue Code, or corresponding section of any future tax code.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:
Appointed by the President

ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS

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

Wesley D. Scoles MD President 4462 Whispering Oaks Drive Tallahassee, FL 32309
Scott Gwartney JD Vice President 6072 Pickwick Road Tallahassee, FL 32309
Paul Harman OD Treasurer 1421 Silver Pine Lane Tallahassee, FL 32312
Katrina Guerry Secretary PO Box 1284 Monticello, FL 32345

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

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

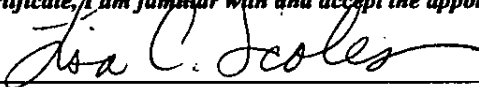
Lisa Scoles JD
Radey Thomas Yon and Clark
301 South Bronough Street, Suite 200
Tallahassee, FL 32301

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Wesley D. Scoles MD
4462 Whispering Oaks Drive
Tallahassee, FL 32309

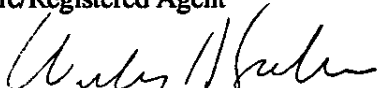
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity.



Signature/Registered Agent

07/10/2007

Date



Signature/Incorporator

07/10/2007

Date

Articles of Incorporation

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Article VIII Dissolution Clause

07 JUL 10 PM 12:29

2b: The following dissolution clause is included in the organization's articles of incorporation (Article VIII):

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Upon the dissolution of this organization, assets shall be distributed for one or more exempt purposes within the meaning of Section 501(c)(3) of the Internal Revenue code, or corresponding section of any future federal tax code, or shall be distributed to the federal government, or to a state or local government, for public purpose.