P00000086549

TRANSMITTAL LETTER

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

SUBJECT: Integrated Practitioners Association, P.A.
(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)

100003388211--8
-09/11/00--01091--009
*****78.75 *****78.75

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 of Status

ADDITIONAL COPY REQUIRED

FROM: Anne Bozzuto, Pres.
Name (Printed or typed)

1529 Margaret ST.
Address

Jacksonville, Fl 32204
City, State & Zip

904-356-0776
Daytime Telephone number

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
00 SEP 11 AM 10:33

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

9/13/00

ARTICLES OF INCORPORATION

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 SEP 11 AM 10:33

ARTICLE I NAME

The name of the corporation shall be:

Integrated Practitioners Association, P.A.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

1529 Margaret St.
Jacksonville, Fl 32204

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Bringing together holistically minded (natural) professionals to advance the health & well-being of our community

ARTICLE IV SHARES

The number of shares of stock is:

500

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es): Anne Bozzuto (Pr.) 1529 Margaret St. Jax Fl 32204 (W)
6240 Riviera Manor Dr. Jax. FL. 32216
Leiah Carr 5478 windermere Dr. Jax., Fl. 32211 (V.P.)
Cindy Willis 3242 Hidden Lake Dr. W., Jax., Fl. 32216 (Sec., Treas.)

ARTICLE VI REGISTERED AGENT

The **name and Florida street address** of the registered agent is:

Leiah Carr 5478 Windermere Dr. Jax, Fl. 32211

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Anne Bozzuto 6240 Riviera Manor Dr. Jax., Fl 32216

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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

Leiah Carr
Signature/Registered Agent

8-25-00
Date

Anne Bozzuto
Signature/Incorporator

8-25-00
Date