

PO1000069/24

TRANSMITTAL LETTER

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

Subject Clark S. McCoy MD, PA

800004468879--5

07/11/01-01023-024

*****78.75 *****78.75

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

☒ \$78.75
Filing Fee
& Certified Copy

☐ \$122.50
Filing Fee
& Certified Copy
(ADD'L COPY REQ'D)

☐ \$131.25
Filing Fee,
Certified Copy
& Certificate
(ADD'L COPY REQ'D)

FROM:	Clark McCoy
	201 SE 2nd Ave, #304
	Gainesville, Florida 32601

01 JUL 11 AM 10:21
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

NOTE: Please provide the original and one copy of the articles. Provide **TWO** copies if you have requested a certified copy as designated in the boxes above.

Ps: 7/13/02

FILED

ARTICLES OF INCORPORATION
OF
Clark S. McCoy MD, PA

01 JUL 11 AM 10:21

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The undersigned incorporator, for the purpose of forming a corporation under the Florida Professional Service Corporation and Limited Liability Company Act, 621 F.S. hereby adopts the following articles of incorporation.

ARTICLE I NAME

The name of the Corporation shall be: Clark S. McCoy MD, PA

ARTICLE II PRINCIPAL OFFICE

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

1026 SW 2nd Ave, Suite D
Gainesville, Florida 32601

ARTICLE III PURPOSE

The specific purpose for which the corporation is being formed is: Family Medicine Clinic

ARTICLE IV SHARES

The number of shares of stock is: 1,500

ARTICLE V REGISTERED AGENT

The name and Florida street address registered agent is:

Clark McCoy
201 SE 2nd Ave, #304
Gainesville, Florida 32601

ARTICLE VI INCORPORATOR

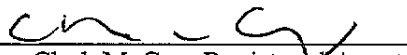
The name and address of the incorporator to these Articles of Incorporation is:

Clark McCoy
201 SE 2nd Ave, #304
Gainesville, Florida 32601


Clark McCoy, Incorporator

7/09/01
Date

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 hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.


Clark McCoy, Registered Agent

7/09/01
Date