

# P01000120023

## TRANSMITTAL LETTER

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

000004729960-7  
-12/18/01--01024--008  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

**SUBJECT:** Chau Anh Nguyen, D.C., P.A.  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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

☐ \$70.00      ☐ \$78.75  
Filing Fee      Filing Fee  
                    & Certificate of Status

☒ \$78.75      ☐ \$87.50  
Filing Fee      Filing Fee,  
& Certified Copy      Certified Copy  
                                    & Certificate of  
                                    Status  
**ADDITIONAL COPY REQUIRED**

FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
01 DEC 18 AM 8:10

**FROM:** Income Tax Service, Inc.  
Name (Printed or typed)

108 Buena Ventura Blvd.  
Address

Kissimmee, FL. 34743  
City, State & Zip

(407) 344-7464  
Daytime Telephone number

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

F. CHESSEY      DEC 20 2001

# ARTICLES OF INCORPORATION

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

## ARTICLE I NAME

The name of the corporation shall be:

Chau Anh Nguyen, D.C., P.A.

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

13357 Mallard Cove Blvd.  
Orlando, FL. 32837

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Chiropractic services to public

## ARTICLE IV SHARES

The number of shares of stock is:

10,000 shares at a par value of \$ 1.00

## ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

Chau Anh Nguyen -President  
13357 Mallard Cove Blvd.  
Orlando, FL. 32837

## ARTICLE VI REGISTERED AGENT

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

Chau Anh Nguyen  
13357 Mallard Cove Blvd.  
Orlando, Fl. 32837

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Chau Anh Nguyen  
13357 Mallard Cove Blvd.  
Orlando, Fl. 32837

\*\*\*\*\*

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

X   
\_\_\_\_\_  
Signature/Registered Agent

12/5/01  
\_\_\_\_\_  
Date

X   
\_\_\_\_\_  
Signature/Incorporator

12/5/01  
\_\_\_\_\_  
Date

FILED STATE  
SECRETARY OF FLORIDA  
TALLAHASSEE, FLORIDA  
01 DEC 18 AM 8:10