

P 02000113575

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

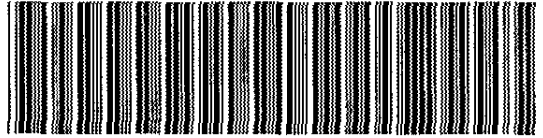
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10/22/02--01074--015 **78.75

RECEIVED
02 OCT 22 11:40
DIVISION OF CLERK OF COURT
FILED
02 OCT 22 PM 1:35
STATE OF NEW YORK
CLERK OF COURT

Bm 10/22

CORPORATION(S) NAME

1. Access Healthcare of Longwood, Inc.

2. Access Healthcare of Orlando, Inc.

<input checked="" type="checkbox"/> Profit <i>Ants</i>	<input type="checkbox"/> Amendment	<input type="checkbox"/> Merger
<input type="checkbox"/> Nonprofit		
<input type="checkbox"/> Foreign	<input type="checkbox"/> Dissolution/Withdrawal	<input type="checkbox"/> Mark
	<input type="checkbox"/> Reinstatement	
<input type="checkbox"/> Limited Partnership	<input type="checkbox"/> Annual Report	<input type="checkbox"/> Other
<input type="checkbox"/> LLC	<input type="checkbox"/> Name Registration	<input type="checkbox"/> Change of RA
	<input type="checkbox"/> Fictitious Name	<input type="checkbox"/> UCC
<input type="checkbox"/> Certified Copy	<input type="checkbox"/> Photocopies	<input checked="" type="checkbox"/> CUS
<input type="checkbox"/> Call When Ready	<input type="checkbox"/> Call If Problem	<input type="checkbox"/> After 4:30
<input checked="" type="checkbox"/> Walk In	<input type="checkbox"/> Will Wait	<input checked="" type="checkbox"/> Pick Up
<input type="checkbox"/> Mail Out		

Name _____
 Availability _____
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10/22/02

Order#: 5625903

Ref#: _____

Amount: \$ _____

MS

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:

Access Healthcare of Longwood, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

Principal: 27 Tollgate Trail, Longwood, FL 32750

Mailing: 2016 South Orange Ave., Orlando, FL 32806

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To engage in any and all lawful acts or activity.

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

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

Director / President / Vice President:

Daniel J. Pavlik - 2014 South Orange Ave., Orlando, FL 32806

Director / Treasurer / Secretary

Robert Cramer - 2109 Tuscarora Trail, Maitland, FL 32751

ARTICLE VI REGISTERED AGENTThe name and Florida street address of the registered agent is:

Robert Cramer

2109 Tuscarora Trail

Maitland, FL 32751

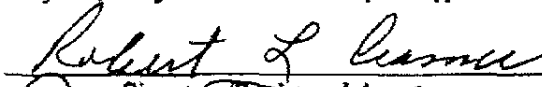
ARTICLE VII INCORPORATORThe name and address of the Incorporator is:

Daniel J. Pavlik

2014 South Orange Ave.

Orlando, FL 32806

 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

10-16-02

Date



Signature/Incorporator

10-16-02

Date

FILED

02 OCT 22 PM 1:36

 STATE
 OF FLORIDA
 COUNTY OF ORANGE
 CITY OF ORLANDO