

P02000116662

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

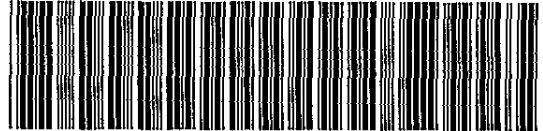
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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10/30

TRANSMITTAL LETTER

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

SUBJECT: RICHARD GOULDING, MD - FREELANCE, PA

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

S STATUS Request

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

FROM: DR. RICHARD GOULDING
Name (Printed or typed)

639 ALAMANDA CT.

Address

INDIALANTIC, FL 32903

City, State & Zip

321-984-2252

Daytime Telephone number

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

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:

RICHARD GOULDING, MD - FREELANCE, PA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

639 ALAMANDA CT.
INDIALANTIC, FL 32903

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

MEDICAL PRACTICE

ARTICLE IV SHARES

The number of shares of stock is:

1000

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

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

DR. RICHARD GOULDING - PRESIDENT
639 ALAMANDA CT.
INDIALANTIC, FL 32903

ARTICLE VI REGISTERED AGENT

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

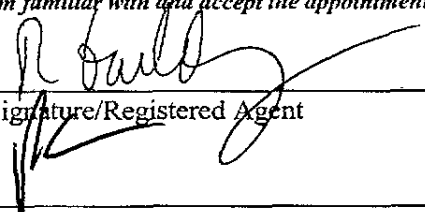
DR. RICHARD GOULDING
639 ALAMANDA CT.
INDIALANTIC, FL 32903

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

RANDALL GOULDING
3000 DUNDEE ROAD, SUITE 105
NORTHBROOK, IL 60062

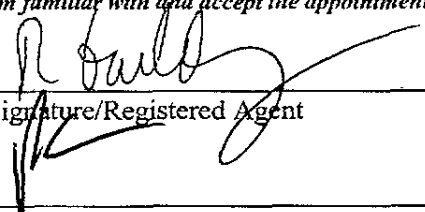
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent



Date



Signature/Incorporator

10/09/02

Date

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FELIX M. GONZALEZ
FELIX M. GONZALEZ