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STATE
TALLAHASSEE, FLORIDA

03 MAR 31 PM 12:29

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TRANSMITTAL LETTER

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

SUBJECT: Kim Hughes ARNP, 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
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: Kim Hughes ARNP, P.A.
Name (Printed or typed)

1109 Black Acre Court South
Address

Winter Springs, FL 32708
City, State & Zip

(407) 222-0607
Daytime Telephone number

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

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03 MAR 31 PM 12:29

ARTICLES OF INCORPORATION

Professional Service Corporation

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. The name of the corporation shall be: Kim Hughes A.B.N.P., P.A.
2. The purpose for which this corporation is organized is Skin care, skin care education, skin care services.
3. The principal place of business and mailing address of the corporation is:
8000 Red Bug Lake Road, Suite 260
Oviedo, FL 32765
4. The corporation shall have the authority to issue 100 shares of common stock, in one class only, each with a par value of \$ 1.00.
5. The registered agent of the corporation is Kim Hughes and the registered street address is 8000 Red Bug Lake Road Suite 260, Oviedo, Florida 32765.
6. The initial Board of Directors shall have 1 member(s) whose name(s) and address(es) is/are as follows: 1109 Black Acre Court South
Winter Springs, FL 32708 Kim Hughes

The number of directors may be raised or lowered by amendment of the bylaws of the corporation but shall in no case be less than one.

7. The incorporator of this corporation is Kim Hughes whose street address is 1109 Black Acre Court South, Winter Springs, FL 32708

Dated 3/26/03

 Incorporator

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 am familiar with and accept the obligations of my position as registered agent.

Dated 3/26/03

 Registered Agent