

P03000116675

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

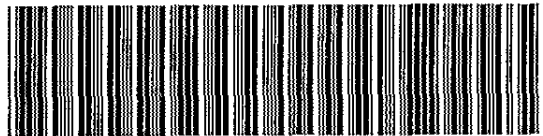
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DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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TRANSMITTAL LETTER

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

SUBJECT: PERY WOMEN'S CENTER, P.A.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is 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:

ANTHONY T. PERRY
Name (Printed or typed)

311. E. 18th ST.
Address

PERY, FL 32347
City, State & Zip

(904) 223-1744
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)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

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ARTICLE I NAME

The name of the corporation shall be:

PERRY WOMEN'S CENTER, P.A.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

311 E. ASH ST.
PERRY, FL 32347

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

WOMEN'S HEALTH CARE

ARTICLE IV SHARES

The number of shares of stock is:

150

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

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

~~DIRECTORS~~
ANTHONY T. PERRIN - PRESIDENT
ANN MARIE PERRIN - TREASURER
INGRID BACHELOR - SECRETARY

BOARD
ANTHONY T. PERRIN
GAIL PERRIN 1ST
SALLY PERRIN - VICE PRESIDENT
GAIL PERRIN - VICE - PRESIDENT, 2nd

ARTICLE VI REGISTERED AGENT

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

ANTHONY T. PERRIN
311 E. ASH ST.
Perry, FL 32347

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

ANTHONY T. PERRIN
210 W. CEDAR ST.
Perry, FL 32347

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

10/20/03

Signature/Incorporator

Date

10/20/03