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| (Requestor's Name) | | | | |
|---|--|--|--|--|
| (Address) | | | | |
| (Address) | | | | |
| (City/State/Zip/Phone #) | | | | |
| PICK-UP WAIT MAIL | | | | |
| (Business Entity Name) | | | | |
| (Document Number) | | | | |
| | | | | |
| Certified Copies Certificates of Status | | | | |
| Special Instructions to Filing Officer: | | | | |
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Office Use Only



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10,000

TRANSMITTAL LETTER

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

| SUBJECT: Donng A. Hargrove, D.O., P. A. (PROPOSED CORPORATE NAME-MUST INCLUDE SUFFIX) | | | | |
|---|--|--|---|--|
| | | | | |
| Enclosed are an orig | inal and one (1) copy of the artic | cles of incorporation and | a check for: | |
| \$70.00 Filing Fee | ☐ \$78.75 Filing Fee & Certificate of Status | \$78.75 Filing Fee & Certified Copy ADDITIONAL CO | \$87.50 Filing Fec, Certified Copy & Certificate of Status PPY REQUIRED | |
| FROM: | Donna A. Hargn | OVC, O.O. (Printed or typed) | · · · · · · · · · · · · · · · · · · · | |
| 13322 2nd St. East Address | | | | |
| | Madeira Beach, City, | FL 33708 State & Zip | | |
| - | 727 - 204 - Daytime To | 0542 elephone number | | |

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

ARTICLES OF INCORPORATION

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

ARTICLE I

NAME

The name of the corporation shall be: Donna A. Hargrove D.O., P.A.

ARTICLE II

PRINCIPAL OFFICE

The principal place of business/mailing address is: 13322 2nd Street East, Madeira Beach, FL 33708-2410

<u>ARTICLE III</u>

PURPOSE

The purpose for which the corporation is organized is: Any and all lawful purpose.

ARTICLE IV

SHARES

The number of shares of stock is: 10,000

ARTICLE V

INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

Donna A. Hargrove, D.O. - President 13322 2nd St. East, Madeira Beach, FL 33708

ARTICLE VI

REGISTERED AGENT

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

Bren K. Ankrum 13322 2nd St. East,

Madeira Beach, FL 33708

ARTICLE VII INCORPORATOR

The name and address of the incorporator is:

Bren K. Ankrum

13322 2nd St. East,

Madeira Beach, FL 33708

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/

Signature/Incorporator

Date 11/15/03

Date

PO HOU I O PH 4: