

P04000046042

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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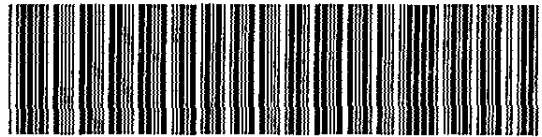
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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3/15/04

TRANSMITTAL LETTER

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

SUBJECT: SOUTH BROWARD CHIROPRACTIC CENTER, INC.
(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 ☐ \$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. Keith Buchalter
Name (Printed or typed)

427 Sheridan St.
Address

Dania Beach, Fl 33004
City, State & Zip

(954) 929-1888
Daytime Telephone number

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

SOUTH BROWARD CHIROPRACTIC CENTER



DR. KEITH M. BUCHALTER
427 E. Sheridan St.
Dania Beach, FL 33004

Telephone: (954) 929-1888
Fax: (954) 929-1770

MARCH 3 2004

Division of Corporations

To whom it may concern,

Enclosed is my Application for my corporation, and
my check for \$87.50.

I contacted the IRS and they told me
my tax ID # is still active and I can
keep the same number.

65-0448016

Please contact me if you require any additional
information.

Thanks,

Dr. Keith Buchalter

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:

SOUTH BROWARD CHIROPRACTIC CENTER, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

427 Sheridan St.
Dania Beach, Fl 33004

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Chiropractic clinic

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

Dr. Keith Buchalter, President

ARTICLE VI REGISTERED AGENT

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

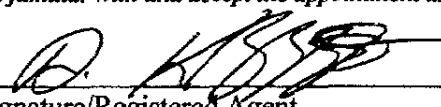
Dr. Keith Buchalter
3400 N. 40 st.
Hollywood, Fl 33021

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Dr. Keith Buchalter
3400 N. 40 st.
Hollywood, Fl 33021

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

MARCH 3 2004
Date


Signature/Incorporator

MARCH 3 2004
Date

FILED
2004 MAR -8 P 1:04
SECRETARY OF STATE
TALLAHASSEE, FLORIDA