

PO4000072396

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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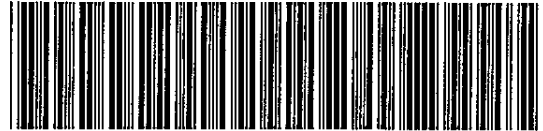
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA
04 MAY - 3 PM 2:43

05/04/04--01029--001 **78.75

TRANSMITTAL LETTER

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

SUBJECT: STEVEN S. HARVEY, M.D., 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: STEVEN S. HARVEY
Name (Printed or typed)

7126 BENEVA RD
Address

SARASOTA, FL 34238
City, State & Zip

941-373-0151
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)

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TALLAHASSEE, FLORIDA

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ARTICLE I NAME

The name of the corporation shall be:

STEVEN S. HARVEY, M.D., P.A.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

7126 BENEVA RD, SARASOTA, FL 34238

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ENGAGING IN A MEDICAL PRACTICE PURSUANT TO CH. 458 F.S.

ARTICLE IV SHARES

The number of shares of stock is:

1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

STEVEN S. HARVEY, PRES., SEC., TREAS., DIRECTOR, 7126 BENEVA RD, SARASOTA, FL 34238

ARTICLE VI REGISTERED AGENT

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

STEVEN S. HARVEY, 7126 BENEVA RD, SARASOTA, FL 34238

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

STEVEN S. HARVEY, 7126 BENEVA RD, SARASOTA, FL 34238


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

4-30-04

Date



Signature/Incorporator

4-30-04

Date