

P04000128545

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

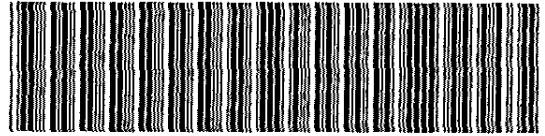
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400040778444

09/10/04--01022--012 **87.50

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
04 SEP 10 PM 3:39

TRANSMITTAL LETTER

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

SUBJECT: Enviro-Med 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: M. Jeffrey White M.D.

Name (Printed or typed)

3103 W. Dunwoodie St.

Address

Tampa, Fl. 33629

City, State & Zip

813-251-2856

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
TALLAHASSEE, FLORIDA

04 SEP 10 PM 3:39

ARTICLE I NAME

The name of the corporation shall be:

Enviro-Med Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

3103 W.Dunwoodie St. Tampa,Fl. 33629

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Medical

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):

M.Jeffrey White M.D. 3103 W. Dunwoodie St. Tampa Fl 33629
President

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

M.Jeffrey White

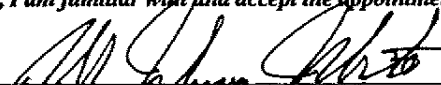
3103 W.Dunwoodie St. Tampa,Fl. 33629

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

M.Jeffrey White M.D. 3103 W.Dunwoodie St. Tampa,Fl 33629

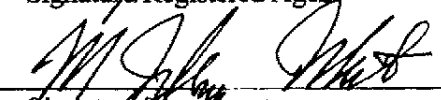
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

 M.D.

Signature/Registered Agent

9/8/04

Date

 M.D.

Signature/Incorporator

9/8/04

Date