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SECRETARY OF STATE
DIVISION OF CORPORATIONS
04 OCT 15 PM 4:22

EM 10/15

TRANSMITTAL LETTER

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

SUBJECT: Medical Social Work Services, 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: John R. Ashcraft
Name (Printed or typed)

1745 Binney Drive
Address

Ft. Pierce, FL 34949
City, State & Zip

(772) 467-0709
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)

ARTICLE I NAME

The name of the corporation shall be: *Medical Social Work Services, Inc.*

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

*1745 Binney Drive
Ft. Pierce, FL 34949*

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

*To provide Medical Social work services through Medicare
certified Home Health Agencies.*

ARTICLE IV SHARES

The number of shares of stock is:

one hundred shares, all of one class, at no par value.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

*John R. Ashcraft, President
1745 Binney Drive
Ft. Pierce, FL 34949*

ARTICLE VI REGISTERED AGENT

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

*John R. Ashcraft
1745 Binney Drive
Ft. Pierce, FL 34949*

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

*John R. Ashcraft
1745 Binney Drive
Ft. Pierce, FL 34949*

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STATE OF FLORIDA
DIVISION OF CORPORATIONS

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

John R. Ashcraft

Signature/Registered Agent

Sept. 6, 2004

Date

John R. Ashcraft

Signature/Incorporator

Sept. 6, 2004

Date