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(Re	equestor's Name)		
(Ad	ldress)		
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(Cit	ty/State/Zip/Phone	e #)	
PICK-UP	WAIT	MAIL	
(Bu	siness Entity Nan	ne)	
(54	Siness Endry Ivan	ne)	
(Do	cument Number)		
Certified Copies Certificates of Status			
Special Instructions to I	Filing Officer:		
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Office Use Only



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J. Shivers APR 26 2005

TRANSMITTAL LETTER

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

SUBJECT: Randolph G. Propos 7	CPA TENAME-MUST INCLUDE SUFFIX)	
Enclosed are an original and one (1) copy of the artic	cles of incorporation and a check for:	_
□ \$70,00 □ \$78.75 Filing Fee & Certificate of Status	\$78.75 \$\frac{\frac{1}{2}}{2}\$\$87.50 Filing Fee Filing Fee, & Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED	
FROM: Randolph G. Propp.	5 D. C. Printed or typed)	
851 W. Indian town	Rd	OS APR 25
Jupiter, Fl 33	3458 State & Zip	CORPO

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:					
Randolph G. Propps D.C. P.A.					***
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 851 W. Indian town Rd			-		
Jupiter, Fl 33458					
ARTICLE III PURPOSE The purpose for which the corporation is organized is:					•
Administering chiropractic care		-			
ARTICLE IV SHARES The number of shares of stock is:					-
100					
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS					
Randolph G. Propps President				سيب آنس	(
9482 S.E. DOUCHD 81.				05 A	: C.;
Hobe Sound, F1 - 33455				APR 25	
ARTICLE VI REGISTERED AGENT				14	7.
The name and Florida street address of the registered agent is:					1/
Randolph G. Propps 9482 3.E. DUNCHUST.				93.ATIC 8: 38	Ă.
9482 S.E. DUNCAU ST.				3	£.3-
Hobe Sound, Fl					-
ARTICLE VII INCORPORATOR The name and address of the Incorporator is:	=	=		-	
Randolph G Propps		**			
9482 3, E WACH 67.					
Hobe Sound FI	****	****	****	*****	K
Having been named as registered agent to accept service of process for the above stated			lace desi	gnated in th	his
certificate, I am familiar with and accept the appointment as registered agent and agree to	act in thi	s capacity			
Sall Asya	<i>(</i>)	م ارور			
Signature/Registered Agent	_ 	5/18/c	e		-
Signature/Registered Agent	<u>.@</u>)	3/18/s Date	e	Accordants	-