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Special Instructions to	Filing Officer:	}
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# TRANSMITTAL LETTER

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

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# SUBJECT: Siam Synergistic Therapy, 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 Filing Fee **2** \$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: Emery S. Smith

Name (Printed or typed)

P.O. Box 61141

Address

Fort Myers, FL 33906-1141

City, State & Zip

239-410-1611

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:

Siam Synergistic Therapy, Inc.

### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 8937 Dorchester St. Fort Myers, FL 33907 / P.O. Box 61141, Fort Myers, FL 33906-1141

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

The Corporation may engage or transact in any or all lawful activities or business permitted under the laws of the United States, the State of Florida or any other state, county, territory or nation.

### ARTICLE IV SHARES

The number of shares of stock is:

The maximum number of shares of stock that this Corporationis authorized to have outstanding at any time is 1,000 shares having a \$ 1.00 par value per share

#### ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Emery S. Smith P.O. Box 61141 Fort Myers, FL 33906-1141 President Suwannasri Wnukowski 12951 Beacon Cove Ln., Fort Myers, FL 33919 VP

#### ARTICLE VI REGISTERED AGENT

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

Emery S. Smith 8937 Dorchester St. Fort Myers, FL 33907

### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Emery S. Smith 8937 Dorchester St. Fort Myers, FL 33907

\*\*\*\*\*

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

Signature/Incorporator

1/ 2005 Date

1/1/2005

Date

