

PD50000110132

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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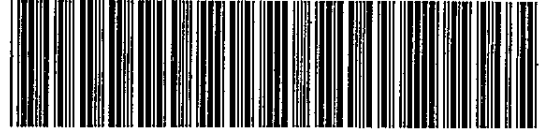
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
05 AUG - 8 AM 11:41

MRS  
8/9

W05-35895

## TRANSMITTAL LETTER

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

SUBJECT: Chris R Choat OD PA  
(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: Chris R Choat OD  
Name (Printed or typed)

1826 N Dixie Highway #201  
Address

Fort Lauderdale FL 33305  
City, State & Zip

954-478-3058  
Daytime Telephone number

**NOTE: Please provide the original and one copy of the articles.**



FLORIDA DEPARTMENT OF STATE  
Glenda E. Hood  
Secretary of State

RECEIVED  
05 AUG -8 AM 7:55  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

July 29, 2005

CHRIS R CHOAT OD  
1826 N DIXIE HIGHWAY  
#201  
FORT LAUDERDALE, FL 33305

SUBJECT: CHRIS R CHOAT, O.D., P.A.  
Ref. Number: W05000035895

We have received your document for CHRIS R CHOAT, O.D., P.A. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The specific nature of business of the professional association must be stated in the document.

A copy of a license or other legal authorization verifying the rendering of a personal service must accompany your articles of incorporation as a professional association.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6879.

Ruby Dunlap  
Regulatory Specialist  
New Filings Section

Letter Number: 505A00049242

**ARTICLES OF INCORPORATION**

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
05 AUG -8 AM 11:41

**ARTICLE I NAME**

The name of the corporation shall be:

Chris R Choat, O.D., P.A.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/ mailing address is:

1826 N. Dixie Highway Unit 201  
Fort Lauderdale FL 33305

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Any and all lawful business related to  
the practice of optometry

**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):

Dr. Chris R Choat  
1826 N. Dixie Highway Unit 201  
Ft. Lauderdale FL 33305

**ARTICLE VI REGISTERED AGENT**

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

Dr. Chris R. Choat  
1826 N. Dixie Highway Unit 201  
Ft. Lauderdale FL 33305

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Dr. Chris R Choat  
1826 N. Dixie Highway Unit 201  
Ft. Lauderdale FL 33305

\*\*\*\*\*

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

Chris R Choat OD

Signature/Registered Agent

7/21/05

Date

Chris R Choat OD

Signature/Incorporator

7/21/05

Date