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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

8/22/05 BWK

W05-35564

TRANSMITTAL LETTER

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

SUBJECT: PHYCON MEDICAL, 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

☐ \$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: PHYCON MEDICAL
Name (Printed or typed)

13325 NORTH 56TH STREET
Address

TAMPA FL 33617
City, State & Zip

813-985-5818
Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

July 27, 2005

PHYCON MEDICAL
13325 N. 56TH STREET
TAMPA, FL 33617

SUBJECT: PHYCON MEDICAL, INC
Ref. Number: W05000035564

We have received your document for PHYCON MEDICAL, INC and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain a registered agent with a Florida street address and a signed statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

You must list at least one incorporator with a complete business street address.

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) 245-6840.

Bruce W Kitchens
Document Specialist
New Filings Section

Letter Number: 705A00048839

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:

PHYCON MEDICAL INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

13325 NORTH 56th Street
TAMPA, FL 33617

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TO MARKET NEW
& RECONDITIONED MEDICAL DIAGNOSTIC EQUIPMENT,
& COMPONENTS

ARTICLE IV SHARES

The number of shares of stock is:

1,000.00

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

PC KLERSY, Pres.
635 Gillette Ave
Tampa, FL 33617

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE VI REGISTERED AGENT

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

SAME PC KLERSY
635 GILLETTE AVE
TAMPA, FL 33617

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

SAME PC KLERSY
635 GILLETTE AVE
TAMPA, FL 33617

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

PC Klersy
Signature/Registered Agent

07.10.05
Date

PC Klersy
Signature/Incorporator

07.10.05
Date