

POS000117437

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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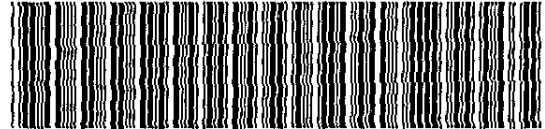
(Business Entity Name)

(Document Number)

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FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
05 AUG 23 PM 3:47

B. McKnight AUG 23 2005

TRANSMITTAL LETTER

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

SUBJECT: E & C HEALTH SERVICES, P.A.

(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: CLAUDIA L. CHAVEZ

Name (Printed or typed)

2312 Hannah Way S.

Address

DUNEDIN, FLORIDA, 34698

City, State & Zip

727-642-2446

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:

E & C HEALTH SERVICES, PA.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

2312 Hannah Way S.
Dunedin, FL, 34698

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Chapter S Corporation for Doctors
Business Activity will be to provide
Health Care & Social Assistance

ARTICLE IV SHARES

The number of shares of stock is:

2000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Officers

PRESIDENT CLAUDIA L. CHAVEZ
2312 Hannah Way S.
Dunedin, FL, 34698

ARTICLE VI REGISTERED AGENT

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

CLAUDIA L. CHAVEZ
2312 Hannah Way S.
Dunedin, FL, 34698

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

CLAUDIA L. CHAVEZ
2312 Hannah Way S.
Dunedin, FL, 34698

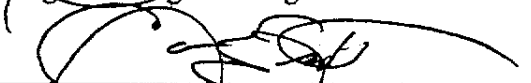
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent

8.20.05

Date



Signature/Incorporator

8.20.05

Date

FILED
CLERK OF STATE
DIVISION OF CORPORATIONS
05 AUG 23 PM 3:48