

P06000001013

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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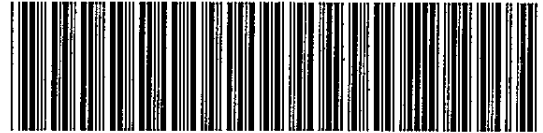
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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06 JAN -3 PM 1:24

CLERK OF STATE
TALLAHASSEE, FLORIDA

11/4/0

COVER LETTER

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

SUBJECT: ISNER Chiropractic Clinic, 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: Matthew Isner
Name (Printed or typed)

1103 Nature View Circle
Address

Port Orange FL 32128
City, State & Zip

386-788-2596
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: Isona Chiropractic Clinic, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is: 1103 Nature View Circle
Port Orange FL 32128

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Chiropractic

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

ARTICLE VI REGISTERED AGENT

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

Matthew Isona
1103 Nature View Circle
Port Orange FL 32128

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Matthew Isona
1103 Nature View Circle
Port Orange FL 32128

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

Matthew Isona
Signature/Registered Agent

12/30/05
Date

Matthew Isona
Signature/Incorporator

12/30/05
Date

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CLERK OF STATE
TALLAHASSEE, FLORIDA