

P06000051857

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

(Business Entity Name)

(Document Number)

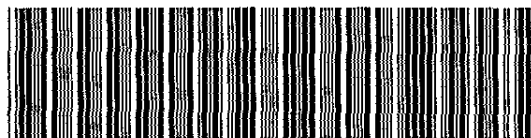
Certified Copies

Certificates of Status

Special Instructions to Filing Officer:

Thomas Caffrey is
AUTHORIZATION BY PHONE TO
CORRECT Name of Corporation
DATE 4-11-06
DOC. EXAM CB

Office Use Only



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04/10/06--01030--004 **78.75

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

06 APR 10 PM 4:07

FILED

0606-17237

TRANSMITTAL LETTER

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

SUBJECT: TAC Medical Services, 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: Thomas A. Cathey, MD
Name (Printed or typed)

400 South Pointe Drive #2109
Address

Miami Beach, FL 33139
City, State & Zip

786-295-0535
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:

TAC HEALTH CARE, PA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

400 South Pointe Drive
#2109
Miami Beach, FL 33139

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Medical Services

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):

Thomas A. Caffrey, MD
OWNER / President / Chief Executive Officer
400 South Pointe Drive
#2109
Miami Beach, FL 33139

ARTICLE VI REGISTERED AGENT

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

Thomas A. Caffrey, MD
400 South Pointe Drive
#2109
Miami Beach, FL 33139

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Thomas A. Caffrey, MD
400 South Pointe Drive
#2109
Miami Beach, FL 33139

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

Date

3/31/06

Signature/Incorporator

Date

3/31/06

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

06 APR 10 PM 4:07

FILED