

P06000066387

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

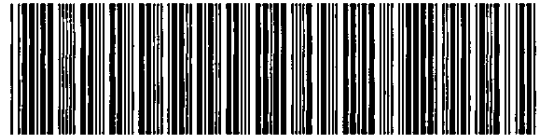
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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05/10/06--01008--016 **78.75

FILED
06 MAY 11 PM 3:04
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Pa.

COVER LETTER

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

SUBJECT: Physician Assistant Services of Palm Beach, 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

~~error~~
~~☒ \$78.75~~
~~Filing Fee~~
~~& Certificate of Status~~

<input checked="" type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED	

FROM: Linda Ford
Name (Printed or typed)

4541 Emerald Vista, Suite 248F
Address

Lake Worth, FL 33461
City, State & Zip

(561) 966-2549
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:

Physician Assistant Services
of Palm Beach, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

4541 Emerald Vista, Suite 248F
Lake Worth, FL 33461

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To conduct medical
services

ARTICLE IV SHARES

The number of shares of stock is:

1000 @\$1.00 per valve

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Linda Ford, PA-C
4541 Emerald Vista, Suite 248F
Lake Worth, FL 33461 > President

ARTICLE VI REGISTERED AGENT

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

Linda Ford, PA-C
4541 Emerald Vista, Suite 248F
Lake Worth, FL 33461

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Linda Ford, PA-C
4541 Emerald Vista, Suite 248F
Lake Worth, FL 33461

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

Linda Ford, PA-C

Signature/Registered Agent

Linda Ford, PA-C

Signature/Incorporator

5/7/06

Date

5/7/06

Date

FILED
06 MAY 11 PM 3:04
SECRETARY OF STATE
TALLAHASSEE, FLORIDA