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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

5/15/06

COVER LETTER

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

FILED
06 MAY 15 PM 4:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SUBJECT: KAHIL VADRE MOSES, D.C. 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
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: KAHIL VADRE MOSES, D.C. P.A.
Name (Printed or typed)

700 US. HWY ONE SUITE B
Address

NORTH PALM BEACH, FLORIDA 33408
City, State & Zip

(561) 848-8482
Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

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06 MAY 15 PM 4: 05

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

April 18, 2006

KAHLIL VADRE MOSES, D.C.
700 US HIGHWAY ONE
SUITE B
NORTH PALM BEACH, FL 33408

SUBJECT: KAHLIL VADRE MOSES, D.C. P.A.
Ref. Number: W06000018287

We have received your document for KAHLIL VADRE MOSES, D.C. P.A. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document is illegible and not acceptable for imaging. We ask that you type or carefully print the information in the appropriate blocks.

The document must state the number of shares of authorized stock.

Please list the street address of each officer/director.

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) 245-6973.

Claretha Golden
Document Specialist
New Filing Section

Letter Number: 506A00026340

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:

Kahlil Vadre Moses, D.C., P.A.

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06 MAY 15 PM 4:05

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

700 US Highway #1 - Suite B
No. Palm Beach, FL 33408

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Chiropractic and Rehabilitation Medicine

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):

Dr. Kahlil Vadre Moses, President
2896 Tennis Club Drive
Apt. 401
W. Palm Beach, FL 33417

ARTICLE VI REGISTERED AGENT

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

Kahlil V. Moses, DC
2896 Tennis Club Drive - Ste. 401
W. Palm Beach, FL 33417

ARTICLE VII INCORPORATOR

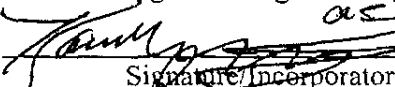
The name and address of the Incorporator is:

Kahlil V. Moses, DC.
2896 Tennis Club Drive - Ste. 401
W. Palm Beach, FL 33417

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

5/4/06
Date


Signature/Incorporator

5/4/06
Date