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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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## **COVER LETTER**

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

SUBJECT:	JARED LECHTE		J., Y. H.
	(PROPOSED CORPORAT	TE NAME – <u>MUST INCLU</u>	<u>IDE SUFFIX</u> )
Enclosed are an ori	ginal and one (1) copy of the artic	eles 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 o Status
		ADDITIONAL CO	
FROM:	· · · · · · · · · · · · · · · · · · ·	(Printed or typed)	,D.O.
	3500 MYSTIC	POINTE DR	.#1707
	AVENT City,	URA FL 33 State & Z/p	180
	954) 2 Daytime Te	88-8539 elephone 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: JARED LECHTENSTEN, D.O., P.A.
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 3500 MYSTIC POINTE DR#1707 AVENTURA, FL 33180
ARTICLE III PURPOSE The purpose for which the corporation is organized is: TO PROVIDE MENCH SERVICES
ARTICLE IV SHARES The number of shares of stock is:
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS  List name(s), address(es) and specific title(s):  JALED LECTRONSTEN, D.O. PRENDENT  3, TOO MYSTIC POINTE DR#1707  ANTICLE VI REGISTERED AGENT  The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:
JAFED LECHTENSTEN, D.O. 3100 MYSTIC POINTE DR. #1707 AVENTURA, FZ 33180
ARTICLE VII INCORPORATOR  The name and address of the Incorporator is:  TALEN LECHTENSTENIDIO,  3700 MYSTIC POINTE PRIFITOT  AVENTURA, FL-33180
Having been named as registered agen 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  D.O.
Signature/Registored Agent  Date    Date