

PO6000094374

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

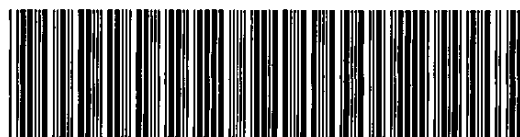
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

02,718

**COVER LETTER**

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

**SUBJECT:** Medina & Snyder & Associates, 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:** Ameet Punwani

Name (Printed or typed)

16528 N. Dale Mabry Hwy

Address

Tampa, FL 33618

City, State & Zip

(813) 961-0094

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:

Medina & Snyder & Associates, Inc.

### **ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

6252 Commercial Way #222  
Weekee Wachee, FL 34613

### **ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Medical Consultation Services

### **ARTICLE IV SHARES**

The number of shares of stock is:

500

### **ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

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

Adrian Medina (President)  
6252 Commercial Way #222, Weekee Wachee, FL 34613

Eileen R. Snyder (Vice President, Secretary)  
6252 Commercial Way #222, Weekee Wachee, FL 34613

### **ARTICLE VI REGISTERED AGENT**

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

Ameet Punwani  
16528 N. Dale Mabry Hwy.  
Tampa, FL 33618

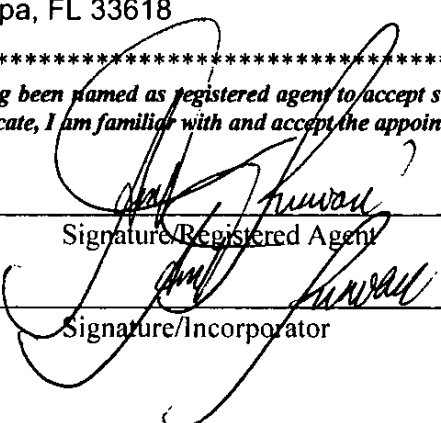
### **ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

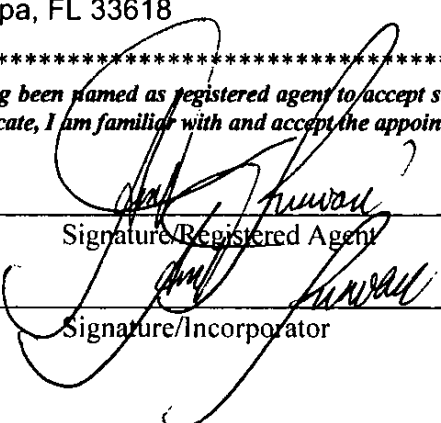
Ameet Punwani  
16528 N. Dale Mabry Hwy.  
Tampa, FL 33618

\*\*\*\*\*  
*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*

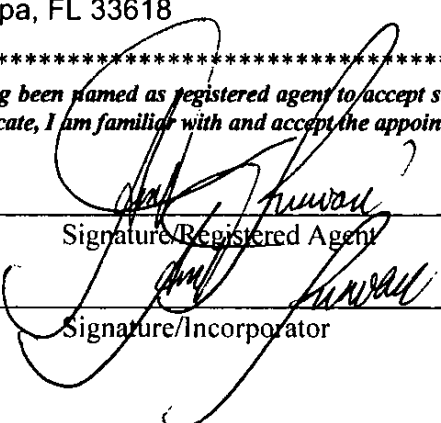
  
\_\_\_\_\_  
Signature/Registered Agent

  
\_\_\_\_\_  
Signature/Incorporator

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

  
\_\_\_\_\_  
7/13/06

Date

  
\_\_\_\_\_  
7/13/06

Date