# DOODD 2992 biz of scripts/efilcovr.exe

# Florida Department of State

Division of Corporations
Public Access System

#### **Electronic Filing Cover Sheet**

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H06000249274 3)))



H060002492743ABC1

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850) 205-0381

From.

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number: 072450003255 Phone: (305)634-3694 Fax Number: (305)633-9696

### FLORIDA PROFIT/NON PROFIT CORPORATION

## THE SOUTEL CLINIC, INC.

Certificate of Status	0 mandamentenan
Certified Copy	1
Page Count	02
Estimated Charge	\$78.75

1 of 2 20/10°d MA F1:1700K 11:43 AM 0CL-11-500E 15:35

ENDIBE

CB 10-12-06



Article 1:

Name and Address of Corporation:

THE SOUTEL CLINIC, INC. 5045 SOUTEL DR, #13 **JACKSONVILLE, FL 32208** 

Article 2:

Capital Stock: The number of shares which the corporation has authorized to

be outstanding at any one time is 1,000 with \$1.00 par value.

Article 3:

Registered Agent Name and Office:

JAMES JOYNER 527 A1A N. PONTE VEDRA BEACH, FL 32082

\*I am familiar with and hereby accept the duties and responsibilities as Register Agent for said corporation.

Signature of Registered Agent

Article 4:

The Board of Directors is: (Board of Directors is NOT REQUIRED).

First listed is President, Second is Vice President, then Secretary/Treasurer.

1. JAMES JOYNER, 527 A1A N., PONTE VEDRA BEACH, FL. 32082

3.

4.

Article 5:

Incorporator Name and Address:

JAMES JOYNER 527 A1A N. PONTE VEDRA BEACH, FL 32082

In witness whereof, I have subscribed my name:

Signature of Incorporator