

P06000132339

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



000080902010

10/17/06--01028--020 \*\*70.00

FILED  
06 OCT 17 AM 8:38  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*fo*

## COVER LETTER

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

**SUBJECT: AVISA MEDICAL CLINIC & SPA 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: **ASANKA WEERASURIYA**

Name (Printed or typed)

**3027 59TH STREET**

Address

**SARASOTA**

**FL 34243**

City, State & Zip

**1-941-228-4405**

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:

AVISA MEDICAL CLINIC & SPA INC

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

3027 59TH STREET  
SARASOTA, FL 34243

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

MEDICAL CLINIC & SPA

**ARTICLE IV SHARES**

The number of shares of stock is:

1000

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

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

MANELLE FERNANDO, 3027 59TH STREET, SARASOTA, FL 34243  
ASANK WEERASURIYA, 3027 59TH STREET, SARASOTA, FL 34243

**ARTICLE VI REGISTERED AGENT**

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

MANELLE FERNANDO, 3027 59TH STREET, SARASOTA, FL 34243

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

MANELLE FERNANDO, 3027 59TH STREET, SARASOTA, FL 34243

FILED  
06 OCT 17 AM 8:38  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

\*\*\*\*\*

*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*

Manelle Fernando.  
Signature/Registered Agent

10/01/06

Date

Manelle Fernando.  
Signature/Incorporator

10/01/06

Date