

PO6000142540

(Requestor's Name)

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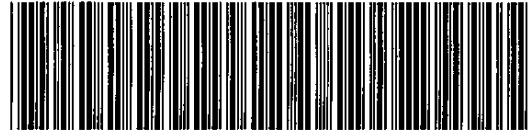
(Business Entity Name)

(Document Number)

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COVER LETTER

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

SUBJECT: HEND ABDELMALEK, "M.D." FAMILY PRACTICE "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: HEND ABDELMALEK, "M.D." "P.A."
Name (Printed or typed)

4558 SAN JUAN AVENUE SUITE # B
Address

JACKSONVILLE, FLORIDA 32210
City, State & Zip

904-389-2077
Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 26, 2006

HEND ABDELMALEK, "M.D." "P.A."
4558 SAN JUAN AVENUE SUITE # B
JACKSONVILLE, FL 32210

SUBJECT: HEND ABDELMALEK, "M.D." "FAMILY PRACTICE "P.A."
Ref. Number: W06000046997

We have received your document for HEND ABDELMALEK, "M.D." "FAMILY PRACTICE "P.A." and your check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The specific business purpose of the professional association must be stated in the document.

A corporation may not serve as its own registered agent. Please designate an individual or another active entity filed or registered with this office, having a Florida street address.

A corporation may not act as its own incorporator. Please designate an individual, another active domestic or foreign corporation, with a street address.

Please return 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 850-245-6052.

Paisley A Alford
New Filing Section
Division of Corporations

Letter Number: 206A00063653

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:

HEND ABDELMALEK "M.D." FAMILY PRACTICE "P.A.".

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

4558 SAN JUAN AVENUE SUITE# B
JACKSONVILLE, FLORIDA 32210

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: *PRACTICE OF MEDICINE*

The undersigned incorporation (S), For the purpose of forming a corporation under the Florida Business Corporations Act, hereby adopt (S) the following articles of incorporation.

ARTICLE IV SHARES

The number of shares of stock is:

The number of shares of Stock that this corporation is authorized to have outstanding at any time is: 1000 shares

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Hend Abdelmalek President
4558 San Juan Avenue, Suite # B
Jacksonville, Florida 32210

ARTICLE VI REGISTERED AGENT

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

Hend Abdelmalek
4558 San Juan Avenue, Suite # B
Jacksonville, Florida 32210

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Hend Abdelmalek
4558 San Juan Avenue, Suite # B
Jacksonville, Florida 32210

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

Hend Abdelmalek
Signature/Registered Agent

Hend Abdelmalek
Signature/Incorporator

10-17-06
Date

10-17-06
Date

FILED
06 NOV -7 AM 9:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA