P07000041117

(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

400095367374

04/02/07--01032--021 **78.75

FILED
2007 APR -2 PM 2:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. Burch Ark 3

COVER LETTER

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

SUBJECT: EJAZ AHMED, MD, 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: EJAZ AHMED
Name (Printed or typed)

3848 CALLIOPE AVENUE
Address

PORT ORANGE, FL 32129
City, State & Zip

386-322-9799
Daytime Telephone number

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

FILED
2007 APR -2 PM 2:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

EJAZ AHMED, MD, P.A.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

3848 CALLIOPE AVENUE
PORT ORANGE, FL 32129

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

MEDICAL SERVICES

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

EJAZ AHMED
3848 CALLIOPE AVENUE
PORT ORANGE, FL 32129

PRESIDENT

ARTICLE VI REGISTERED AGENT

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

EJAZ AHMED
3848 CALLIOPE AVENUE
PORT ORANGE, FL 32129

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

EJAZ AHMED
3848 CALLIOPE AVENUE
PORT ORANGE, FL 32129

****

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

SIGN HERE 3/28/07

Signature/Registered Agent Date

SIGN HERE 3/28/07

Signature/Incorporator Date