# P07000073815

(Requestor's Name)				
(Address)				
(Ac	ldress)			
(City/State/Zip/Phone #)				
PICK-UP	WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				





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SECRE F-STATE
ALLANA'S SEE, FLORID

MADO

## **COVER LETTER**

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

SUBJECT: Premie	er Infectious Disease C	Care, Inc.		
	(PROPOSED CORPORATE	ΓΕ NAME – <u>MUST INCL</u>		
S70.00   Filing Fee	\$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy  ADDITIONAL CO	& Certificate of Status	
FROM: Kartik Shah  Name (Printed or typed)				
	3074 Thornhill Grand Circ	• • •	······	
<u>O</u>	rlando, FL 32820 City, S	State & Zip		
<u>40</u>	7-568-6176	slenhane 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:

Premier Infectious Disease Care, Inc.

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

#### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

18074 Thornhill Grand Circle Orlando, FL 32820

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

**Medical Practice** 

#### ARTICLE IV SHARES

The number of shares of stock is:

1,000,000

### ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Kartik Shah, Vice President Archana Shah, President 18074 Thornhill Grand Circle Orlando, FL 32820

#### ARTICLE VI REGISTERED AGENT

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

Kartik Shah 18074 Thornhill Grand Circle Orlando, FL 32820

#### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Archana Shah 18074 Thornhill Grand Circle Orlando, FL 32820

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 6/-24/07AKULAL 6/-23-07Signature/Incorporator Date