

P07000083823

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

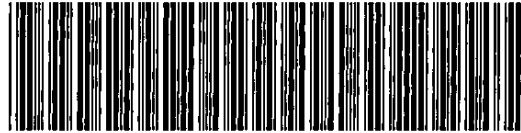
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

C.S. 7-25

COVER LETTER

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

SUBJECT: Nationwide Pulmonary Services 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: Wilhel Polunice
Name (Printed or typed)

15913 SW 63 TER
Address

Miami, FL 33193
City, State & Zip

786-499-8645
Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 29, 2007

WILEHEL POLYNICE
15913 SW 63 TERR.
MIAMI, FL 33193

SUBJECT: NATIONWIDE PULMONARY SERVICES INC
Ref. Number: W07000025550

We have received your document for NATIONWIDE PULMONARY SERVICES INC and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must state the number of shares of authorized stock.

The document must contain a registered agent with a Florida street address and a signed statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

You must list at least one incorporator with a complete business street address.

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

Please return the original and one copy of 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) 245-6047.

Carolyn Lewis
Document Specialist
New Filing Section

Letter Number: 907A00036823

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:

Nationwide Pulmonary Services Inc

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

15913 SW 63 TER
Miami, FL 33193

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

to make a positive difference in love and health of Friends
and Family in our Community.

ARTICLE IV SHARES

The number of shares of stock is:

1

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Wilchel Polynice, RRT
15913 SW 63 TER
Miami, FL 33193

ARTICLE VI REGISTERED AGENT

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

15913 SW 63 TER Wilchel Polynice
Miami FL 33193

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

15913 SW 63 TER
Miami FL 33193

Wilchel Polynice

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



Signature/Incorporator

FILED

2007 JUL 24 AM 11:58

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

5/22/07

Date

8/20/07

Date