

PO7000090520

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

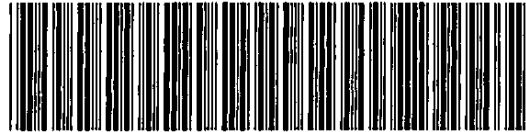
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900105085489

07/09/07--01037--010 **78.75

FILED
07 AUG 13 AM 9:42
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Per

COVER LETTER

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

SUBJECT: AJ Reid & Associates

(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: Audrey J. Reid

Name (Printed or typed)

7513 Pitch Pine Circle, #B

Address

Tampa, Florida ~~33680~~ 33617

City, State & Zip

(813) 732-0274

Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 11, 2007

AUDREY J. REID
7513 PITCH PINE CIRCLE, #B
TAMPA, FL 33617

SUBJECT: AJ REID & ASSOCIATES
Ref. Number: W07000032938

We have received your document for AJ REID & ASSOCIATES and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The corporate name must contain a suffix that will clearly indicate that it is a corporation. Such suffixes include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

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: 107A00044180

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:

AJ Reid & Associates, Incorporated

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

7513 Pitch Pine Circle, #B
Tampa, Florida 33617

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Healthcare Services

ARTICLE IV SHARES

The number of shares of stock is:

1.00

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Audrey J. Reid
7513 Pitch Pine Circle, #B
Tampa, Florida 33617
Chief Executive Officer

ARTICLE VI REGISTERED AGENT

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

Audrey J. Reid
7513 Pitch Pine Circle, #B
Tampa, Florida 33617

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

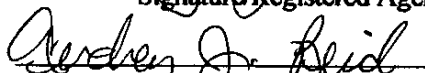
Audrey J. Reid
7513 Pitch Pine Circle, #B
Tampa, Florida 33617

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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



Date



Date