

PD7000092669

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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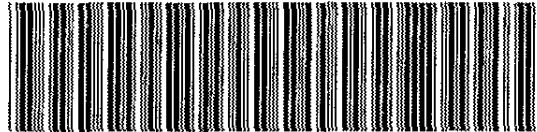
(Business Entity Name)

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2007 AUG 17 P 3:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. WHITE AUG 17 2007

COVER LETTER

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

SUBJECT: A/C Doctor's Rejuvenation Center
(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: Glen Harvey
Name (Printed or typed)

126 Timberline Tr.
Address

Ormond Beach, FL 32174
City, State & Zip

(386) 672-7552
Daytime Telephone number

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

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ARTICLES OF INCORPORATION OF
A/C DOCTOR'S REJUVENATION CENTER INC

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The under signed incorporator hereby makes, subscribes to and acknowledges and files these Articles of Incorporation for the purpose of organizing and incorporating a corporation for profit under the laws of the State of Florida.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I

The name of the corporation shall be "A/C DOCTOR'S REJUVENATION CENTER" and it shall hereafter be referred to as "Corporation",

INC

ARTICLE II

The principal place of business and mailing address of this corporation is:

126 Timberline Trail
Ormond Beach, Florida 32174

ARTICLE III

The Corporation is established to own and operate business in the State of Florida.

ARTICLE IV

The aggregate number of shares which the Corporation shall have the authority to issue is One Thousand. These shares shall consist of one class only and such class shall be known as "Common Stock" of the Corporation. Each share shall have a par value of One (\$1.00) dollar.

ARTICLE V

The name and address of the President of the Corporation is:

GLEN HARVEY
126 Timberline Trail
Ormond Beach, Florida 32174

ARTICLE VI

The name and Florida street address of the initial registered Agent is:

GLEN HARVEY
126 Timberline Trail
Ormond Beach, Florida 32174

To signify acceptance of appointment as Registered Agent and to signify agreement to keeping open said office per Chapter 48, Florida Statutes, the Registered Agent named in this Article has signed these Articles as required by law.

ARTICLE VII

The name and address of the incorporator of the corporation is:

GLEN HARVEY
126 Timberline Trail
Ormond Beach, Florida 32174

IN WITNESS WHEREOF, the undersigned incorporator, who is a natural person who is competent to contract under the laws of Florida, by these presents, duly execute, acknowledge and cause to deliver to the Florida department of State these Articles of Incorporation of A/C DOCTOR'S REJUVENATION CENTER INC., and he requests that the Department of State file these Articles, as of the date and time indicate in article II hereof, and in accordance with Chapter 607 and Chapter 621, Florida Statutes, accordingly, the undersigned incorporator does hereto set his hand and seal at Daytona beach, Florida, this _____ day of August, 2007.



GLEN HARVEY, Incorporator.

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in the certificate, I hereby accept the appointment as Registered Agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept obligations of my position as registered Agent.

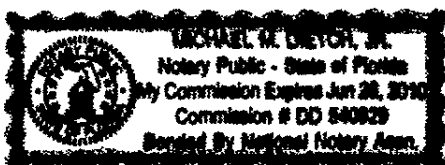


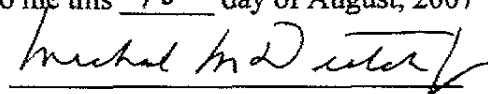
GLEN HARVEY/Registered Agent

10 Aug 07
Date

STATE OF FLORIDA
COUNTY OF VOLUSIA

The foregoing acceptance of Designation of registered Agent of A/C DOCTOR'S REJUVENATION CENTER INC. was acknowledged before me by GLEN HARVEY as registered Agent, who is personally known to me this 10 day of August, 2007





Michael M. Dietch Jr.
Notary Public, State of Florida