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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

20-02-8  
2007



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

August 15, 2007

BETTY F. SCHERER  
4640 N. FEDERAL HWY., SUITE G  
FT. LAUDERDALE, FL 33308

SUBJECT: PODIATRY CARE, INC.  
Ref. Number: W07000039836

We have received your document for PODIATRY CARE, INC., however, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State.

The fees for profit and nonprofit, domestic or foreign are as follows:

Filings Fees:	\$35.00
Registered Agent Designation	\$35.00
Certified Copy	\$8.75
Certificate of Status	\$8.75

Please return the corrected 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) 245-6995.

Wanda Cunningham  
Document Specialist  
New Filing Section

Letter Number: 607A00049730

## COVER LETTER

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

SUBJECT: PODIATRY CARE, 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: BETTY F SCHERER

Name (Printed or typed)

4640 N FEDERAL HWY SUITE G

Address

FT LAUDERDALE FL, 33308

City, State & Zip

954-776-0000

Daytime Telephone 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:

PODIATRY CARE, INC.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

4640 N FEDERAL HWY SUITE G  
FT LAUDERDALE, FLORIDA 33308

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

PROVIDE SERVICES OF BILLING, COLLECTIONS AND OFFICE MANAGEMENT.

**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):

BETTY FAY SCHERER - PRESIDENT/SECRETARY  
4640 N FEDERAL HWY SUITE G  
FT LAUDERDALE, FL 33308

**ARTICLE VI REGISTERED AGENT**

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

BETTY FAY SCHERER  
4640 N FEDERAL HWY SUITE G  
FT LAUDERDALE, FL 33308

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

BETTY FAY SCHERER  
4640 N FEDERAL HWY SUITE G  
FT LAUDERDALE, FL 33308

\*\*\*\*\*

*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*

Betty F. Scherer

Signature/Registered Agent

Betty F. Scherer

Signature/Incorporator

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

8-9-07

Date

8-9-07

Date