

P07000122648

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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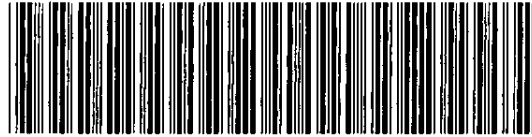
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2007 NOV -9 PM 4: 10

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. Burch NOV 13 2007

COVER LETTER

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

SUBJECT: **PROPOSED CORPORATE NAME:**

LIEM THAT TON, M.D. INC.

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

- \$87.50
- Filing Fee, Certified Copy & Certificate of Status
- **ADDITIONAL 2 COPY REQUIRED**

FROM:

JONATHAN TON, CFP

**16051B BROOKHURST STREET
FOUNTAIN VALLEY, CA 92708
TEL. (714) 775-9077**

Address

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: **LIEM THAT TON, M.D. INC.**

ARTICLE II **PRINCIPAL OFFICE**

The principal place of business/mailing address is:

2015 LIAMARIE WAY
WINTER HAVEN, FL 33884

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ARTICLE III **PURPOSE**

The purpose for which the corporation is organized is to engage in the PROFESSION of Medicine and any other lawful activities (other than the banking or trust company business) not prohibited to a corporation engaging in such profession by applicable laws and regulations.

ARTICLE IV **SHARES**

The number of shares of stock is 8,000,000

ARTICLE V **INITIAL OFFICERS AND/OR DIRECTORS**

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

LIEM THAT TON, M.D.
Chief Executive Officer & Board of Director
2015 LIAMARIE WAY
Winter Haven, FL 33884

ARTICLE VI
REGISTERED AGENT

The name and Florida street address of the registered agent is:

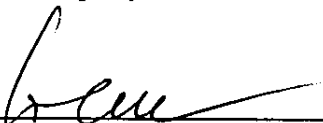
LIEM THAT TON, M.D.
2015 LIAMARIE WAY
Winter Haven, FL 33884

ARTICLE VI
INCORPORATOR

The name and address of the Incorporator is:

LIEM THAT TON, M.D.
2015 LIAMARIE WAY
Winter Haven, FL 33884


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

NOV. 01st 2007

Date



Signature/Incorporator

NOV. 01st 2007

Date