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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

07 DEC 24 PM 2:59

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COVER LETTER

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

SUBJECT: GAMIL BOCTOR M.D., P.A.

(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: P.C. BUTLER
Name (Printed or typed)

3583 NW 9TH AVE
Address

FORT LAUDERDALE, FL 33309
City, State & Zip

954.564.5309
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:

GAMIL BOCTOR M.D., P.A.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

4701 N FEDERAL HWY SUITE A-12
FORT LAUDERDALE, FL 33308-4608

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TO RENDER MEDICAL SERVICES AND CONDUCT ANY OTHER LAWFUL SERVICE ALLOWED.

ARTICLE IV SHARES

The number of shares of stock is:

100 COMMON

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

GAMIL BOCTOR, PRESIDENT
4701 N FEDERAL HWY SUITE A-12
FORT LAUDERDALE, FL 33308-4608

ARTICLE VI REGISTERED AGENT

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

GAMIL BOCTOR, PRESIDENT
4701 N FEDERAL HWY SUITE A-12
FORT LAUDERDALE, FL 33308-4608

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

GAMIL BOCTOR, PRESIDENT
4701 N FEDERAL HWY SUITE A-12
FORT LAUDERDALE, FL 33308-4608

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

FILED
07 DEC 24 PM 2:59
CLERK OF STATE
TALLAHASSEE, FLORIDA