

P08000006278

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

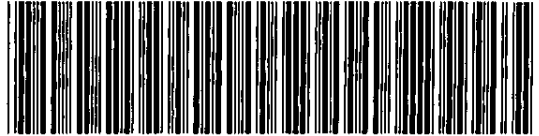
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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08 JAN 17 PM 3:50  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

1/18/08

## COVER LETTER

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

**SUBJECT:** KREEGEL FARRIS CORPORATION  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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

<input type="checkbox"/> \$70.00	<input type="checkbox"/> \$78.75
Filing Fee	Filing Fee & Certificate of Status

<input type="checkbox"/> \$78.75	<input checked="" type="checkbox"/> \$87.50
Filing Fee	Filing Fee,
& Certified Copy	Certified Copy
	& Certificate of
	Status
<b>ADDITIONAL COPY REQUIRED</b>	

FROM: Paige Kreegel

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Name (Printed or typed)

3420 Tamiami Trail Suite 2

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Address

Port Charlotte, FL 33952

---

City, State & Zip

941-629-4888

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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:

KREEGEL Farris Corporation

## **ARTICLE II      PRINCIPAL OFFICE**

The principal place of business/mailling address is:

3420 Tamiami Trail  
Suite 2  
Port Charlotte, FL. 33952

## **ARTICLE III      PURPOSE**

The purpose for which the corporation is organized is:

To provide Medical Services

## **ARTICLE IV      SHARES**

The number of shares of stock is:

Ten Thousand Shares of stock are authorized

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

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

Paige Kreegel  
3420 Tamiami trail Port Charlotte, FL 33952 Vice President

Daniel Farris  
21234 Olean Blvd. President  
Unit 6  
Port Charlotte, FL 33952

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TALLAHASSEE, FLORIDA

**ARTICLE VI REGISTERED AGENT**

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

Paige Kreegel  
3420 Tamimi Trail  
Suite 2 Port Charlotte, FL 33952

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Paige Kreegel  
3420 Tamiami Trail  
suite 2  
Port Charlotte, FL 33952

\*\*\*\*\*

*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

1-12-08  
Date

1-12-08  
Date

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