

P08000034880

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600121703816

04/03/08--01027--006 **78.75

RECEIVED
08 APR -3 AM 10:37
DEPT. OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FILED
08 APR -3 PM 2:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

414
58
2

Charter Number Only

4/2/08

Requestor's Name

Address

City

State

ZIP

Phone

VALIDATION ONLY

CORPORATION(S) NAME

Mount Cora Laser Solutions Inc.

☒ Profit
☐ NonProfit

☐ Amendment

☐ Merger

☐ Foreign

☐ Dissolution

☐ Mark

☐ Limited Partnership

☐ Annual Report

☐ Other

☐ Reinstatement

☐ Reservation

☐ Change of Registered Agent

☒ Certified Copy of Articles

☐ Photo Copies

☐ Certificate Under Seal

☐ Call When Ready

☐ Call If Problem

☐ After 4:30

☒ Walk-In

☐ Will Wait

☒ Pick Up

☐ Mail Out

Name

Availability

Document

Examiner

Updater

Verifier

Acknowledgment

W.P. Verifier



Empire Toll Free: 1-800-432-3028

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:

Mount Dora Laser Solutions Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

3619 Lake Center Drive
Mount Dora, FL 32757

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To conduct any and all lawful business allowed
by the state of Florida.

ARTICLE IV SHARES

The number of shares of stock is:

100 shares @ \$1.00 par value

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Dr. Shirley Nagel, Dr. Eleanor Brown,
Director, Pres. VP, Treas & Sec'y Director, Pres. VP, Treas. & Sec'y
Both at 3619 Lake Center Drive
Mount Dora, FL 32757

ARTICLE VI REGISTERED AGENT

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

Dr. Shirley Nagel

3619 Lake Center Dr.
Mount Dora, FL 32757

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Dr. Shirley Nagel

3619 Lake Center Dr.
Mount Dora, FL 32757

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

✓ Shirley Nagel
Signature Registered Agent

4/1/08
Date

✓ Shirley Nagel
Signature Incorporator

4/1/08
Date

FILED
08 APR -3 PM 2:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA