

P09000054765

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~~4109-24750~~

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6/24



200156246932

05/26/09--01012--022 **78.75

APPROVED
AND
FILED

09 JUN 23 PM 4:25

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: Primary Care MD 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: Peter Lamelas, MD
Name (Printed or typed)

9060 North Military Trail
Address

Palm Beach Gardens, FL 33410
City, State & Zip

561-622-2442
Daytime Telephone number

pldoc@aol.com
E-mail address: (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the articles.



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 12, 2009

PETER LAMELAS, MD
9060 NORTH MILITARY TRAIL
PALM BEACH GARDENS, FL 33410

SUBJECT: PRIMARY CARE MD INC
Ref. Number: W09000024850

We have received your document for PRIMARY CARE MD INC and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

Please return 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) 245-6934.

Loria Poole
Regulatory Specialist II

Letter Number: 109A00017847

RECEIVED
DEPARTMENT OF STATE
09 JUN 23 AM 10:26

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: Primary Care MD Inc.

ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:

9060 North Military Trail
Palm Beach Gardens, FL 33410

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Medical care

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):

Peter Lamelas, MD
Medical Director
9060 North Military Trail

Palm Beach Gardens, FL 33410

ARTICLE VI REGISTERED AGENT

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

Peter Lamelas, MD
9060 North Military Trail
Palm Beach Gardens, FL 33410

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Peter Lamelas, MD
9060 North Military Trail
Palm Beach Gardens, FL 33410

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

09 JUN 23 PM 4:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED

Date

5/21/09

Date