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Ncl

10-5-09

COVER LETTER

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

SUBJECT: ROA-LICEA MD,PA
(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 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

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

FROM: JORGE D.HEREDIA,CPA
Name (Printed or typed)

1428 SW 124 PL
Address

MIAMI,FL 33184
City, State & Zip

(305)552-73-21
Daytime Telephone number

abad1@bellsouth.net
E-mail address: (to be used for future annual report notification)

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: ROA-LICEA MD,PA

ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:
6200 SW 114 ST
PINECREST,FL 33156

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
PROVIDE MEDICAL SERVICES

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):
RAUL J ROA MD-PRESIDENT,6200 SW 114 ST,PINECREST,FL 33156
IRINA LICEA MD-V/P,6200 SW 114 ST,PINECREST,FL 33156

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:
RAUL J ROA MD
6200 SW 114 ST,PINECREST,FL 33156

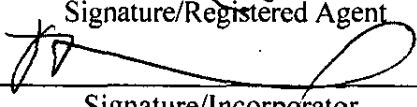
ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:
JORGE D.HEREDIA,CPA
1428 SW 124 PL
MIAMI,FL 33184

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

9/29/09

Date

9/29/09

Date

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CLERK OF CIRCUIT COURT
MIAMI COUNTY, FLORIDA