

P1 0000005828

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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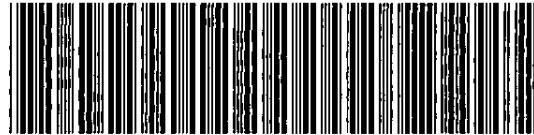
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1 21 10 PDS

COVER LETTER

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

SUBJECT: QUEST HEALTH WELLNESS CHIROPRACTIC Center 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: JAMES MEIDEL
Name (Printed or typed)

2311 10 Ave North Suite 2
Address

Lake Worth, FL 33461
City, State & Zip

(772) 834-0907
Daytime Telephone number

Aicc103 at Yahoo.com
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:

QUEST HEALTH WELLNESS CHIROPRACTIC Center INC.

ARTICLE II PRINCIPAL OFFICE

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

2311 10 AVE NORTH Suite 2
Lake Worth, FL 33461

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

CHIROPRACTIC

ARTICLE IV SHARES

The number of shares of stock is:

1,000⁰⁰

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

JAMES MEIDEL (OWNER)
2311 10 Ave North
Lake Worth, FL 33461

ARTICLE VI REGISTERED AGENT

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

JAMES MEIDEL
2311 10 Ave North Suite 2
Lake Worth, FL 33461

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

JAMES MEIDEL
2311 10 Ave North Suite 2
Lake Worth, FL 33461

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

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10 JAN 20 PM 3:36
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1-12-10

Date

1-12-10

Date