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SECRETARY OF STATE TALLAHASSEE FLORIDA





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

Subject: Mary J. Moses DC, PA.

Enclosed is an original and one (1) copy of the articles of incorporation and a check for \$78.75 representing the filing fee and a certificate.

From: Mary J. Moses DC 2389 Davis Blvd. Naples, FL 34104

239-774-2444



ARTICLES OF INCORPORATION

10 JUL 19 AH 7: 43

Professional Association

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Article I

The name of the Corporation shall be Mary J. Moses DC, PA

Article II

The purpose of which this corporation is organized is to provide services relating to the profession of Chiropractic Services.

Article III

The principal place of business is 2389 Davis Blvd. Naples, FL 34104 and the mailing address of the corporation is 2389 Davis Blvd. Naples, FL 34104.

Article IV

The Corporation shall have the authority to issue 500 shares of common stock, in one class only, each with a par value of \$ 1.00.

Article V

The registered agent of the corporation is Bernard P. Decko Jr. and the registered street address is 201 Vintage Bay Drive #31 Marco Island, FL 34145.

Article VI

The initial board of directors shall have one member whose name and address is Mary J. Moses DC 2389 Davis Blvd. Naples, FL 34104The number of directors may be raised or lowered by amendment of the bylaws of the corporation but shall in no case be less than one.

Article VII

The incorporator of this corporation is Mary J. Moses DC 2389 Davis Blvd. Naples, FL 34104

Dated x 115/0010

Incorporator

APPROVEL AND FILED

10 JUL 19 AM 7: 43

SECRETARY OF STATE TALLAHASSEE, FLORIDA

Having been named as registered agent and to accept service of process for the above stated corporation at a place designated by this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and am familiar with and accept the obligations of my position as registered agent.

Date

Registered Agent