

PI 0000066229

(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:

Vidur Bakhan GAVE

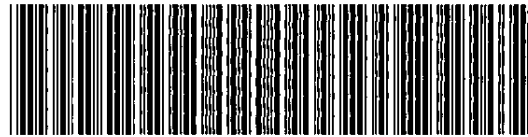
AUTHORIZATION BY PHONE TO

CORRECT Article 17 RA

DATE \_\_\_\_\_

DOC. EXAM. 23 8/13

Office Use Only



100183952271

08/10/10--01019--004 \*\*78.75

10 AUG 10 PM 3:03  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

APPROVED  
AND  
FILED

Ps 8/12/10

## COVER LETTER

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

**SUBJECT:** Palms Urgent Care Centers 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:** Vidur Francisco Rakhar

Name (Printed or typed)

18100 NE 19th Avenue

Address

N. Miami Beach FL 330162

City, State & Zip

305-949-7990

Daytime Telephone number

frakhar@aol.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:

Palms Urgent Care Inc

**ARTICLE II PRINCIPAL OFFICE**

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

18100 NE 19th Avenue

N. Miami Beach FL 33162

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

For Profit

**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):

Vidur Francisco 18100 NE 19th President

Rakhar Ave, N. Miami  
Beach FL 33162

**ARTICLE VI REGISTERED AGENT**

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

Vidur F. Rakhar

18100 NE 19th Ave

N. Miami Beach FL 33162

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Vidur F. Rakhar

18100 NE 19th Ave

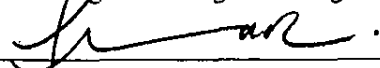
N. Miami Beach FL 33162

\*\*\*\*\*

*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

APPROVED  
AND  
FILED

10 AUG 10 PM 3:03

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

8/6/2010

Date

8/6/2010

Date