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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

AUG 23 2010  
D.A. WHITE

## COVER LETTER

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

**SUBJECT:** eServMD, 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      ☒ \$78.75  
Filing Fee      Filing Fee  
                         & Certificate of Status

☐ \$78.75      ☐ \$87.50  
Filing Fee      Filing Fee,  
& Certified Copy      Certified Copy  
                         & Certificate of  
                         Status

**ADDITIONAL COPY REQUIRED**

**FROM:** Ishrat Khurshid

Name (Printed or typed)

11471 West Sample Rd #40

Address

Coral Springs, Florida 33065

City, State & Zip

954-234-8203

Daytime Telephone number

ishrat@metrorealtyflorida.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:

eServMD, Inc.

## **ARTICLE II PRINCIPAL OFFICE**

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

11471 West Sample Rd #40, Coral Springs, Florida 33065

## **ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Supplier of Products and Services to Medical Facilities

## **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):

I. Zafar Hamid MD  
President

Ishrat Khurshid  
CEO

## **ARTICLE VI REGISTERED AGENT**

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

Ishrat Khurshid, 11298 NW 70 CT, Parkland, Florida 33076

## **ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Ishrat Khurshid, 11298 NW 70 CT, Parkland, Florida 33076

\*\*\*\*\*  
*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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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

8-13-2010  
Date

8-13-2010  
Date