P12000009076

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	-
Special Instructions to Filing Officer:	
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COVER LETTER

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

SUBJECT: Naval Parikh, P.A.		
(PROPOSED CORPORA	TE NAME – <u>MUST INC</u>	LUDE SUFFIX)
Enclosed are an original and one (1) copy of the art	icles of incorporation ar	nd a check for:
\$70.00 \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL C	\$87.50 Filing Fee, Certified Copy & Certificate of Status OPY REQUIRED
FROM: Naval Parikh	e (Printed or typed)	
	Apt #811 Address	
Miami, Fl 33132	, State & Zip	
843-901-9338	Felephone number	
parikhng@gmail.com E-mail address: (to be use	•	t 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 The name of the co				
ARTICLE II	PRINCIPAL OFFICE			
_	Principal street address	Mailing add	ress, if different is:	
	1900 North Bayshore Dr.			
Ž.	Suite #811 Miami, Fl 33132			
13	Maril, F133132	<u> </u>		
ARTICLE III				
	hich the corporation is organized is:		at the first of the second and	
	on is formed to engage in every pha			
	lawful business for which corporatio			
	amended. In addition, the Corporation			
	ages, stocks, bonds or any other type			
•	lease real and personal property ne	cessary for its operation a	and rendering of services.	
ARTICLE IV	<u>SHARES</u> res of stock is:The total authorized capital s	stock of the corporation shall	be One Thousand (1000)	
The number of sha	shares of common stock hav	ring a par value of \$ 10 per sl	hare	
ARTICLE V			na.c.	
Name and T	itle:Naval Parikh, M.D., J.D.	Name and Title:		
Address:	1900 N. Bayshore Dr.	Address:		
	Apt. # 811			
	Miami, Fl 33132			
Name and T	itle:	Name and Title:		
Address:		Address:		
Name and T		Name and Title		
Address:	itle:	Address:		
Address.		Audress.		
	<u>REGISTERED AGENT</u> orida street address (P.O. Box NOT acceptable	afthe registered agent is:		
Name:	Naval Parikh	e) of the registered agent is.	770-00	
Address:	1900 N. Bayshore Dr. Apt.#81	 1	屋 2	
7.44.455.	Miami, Fl 33132			
	•			
ARTICLE VII			The tree of the second	
Name:	dress of the Incorporator is: Naval Parikh			
Address:	1900 N. Bayshore Dr. Apt.#811			
Addiess.	Miami, Fl 33132			
	,			
Having been nam	ed as registered agent to accept service of pro	cess for the above stated corpora	ation at the place designated in	
this certificate, I a	m familiar with and accept the appointmentas	registered agent and agree to act	in this capacity	
			1/10/10	
			1/19/12	
	Required Signature/Registered Agent	<i>'</i>	/ Date	
I submit this docu	iment and affirm that the facts stated herein	dre true. I am aware that the fa	ilse information submitted in a	
	epartment of State constitutes a third degree fe			
		• • •) 1	
			1/19/12	
	Required Signature/Incorporator		Date	