

P/2000017018

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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WAIT

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MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

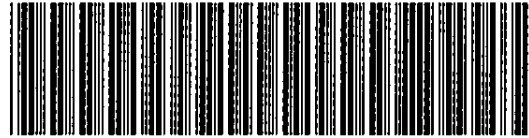
Special Instructions to Filing Officer:

ADDED "NUMBER" OF SHARES  
OF STOCK PER TELEPHONE  
CONVERSATION WITH DEBORAH  
MIKEALS, CFO.

K 02/29/12

Office Use Only

W12-3337



000217654900

01/17/12--01030--008 \*\*78.75

FILED  
12 FEB 17 PM 1:06  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

K 02/29/12



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

RECEIVED  
12 FEB 17 PM 3:15

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Site Doctors

January 19, 2012

ROBERT W. MIKEALS III  
2798 NW 27TH TERRACE  
LAKE PANASOFFKEE, FL 33538

SUBJECT: HMI (HALL MIKEALS, INC.)  
Ref. Number: W12000003337

We have received your document for HMI (HALL MIKEALS, INC.) and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Entities may file using only the entity's name. Please delete any reference to the "doing business as name" in your document. If you wish to register your fictitious name, you may do so by filing an application and submitting the appropriate fees to this office.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

**Adding "of Florida" or "Florida" to the end of a name is not acceptable.**

The document number of the name conflict is L03000000308 (HMI LLC).

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6949.

Thomas Chang  
Regulatory Specialist II  
New Filing Section

Letter Number: 512A00001298

## COVER LETTER

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

**SUBJECT: Site Doctors, Incorporated**

(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

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
<b>ADDITIONAL COPY REQUIRED</b>	

FROM: Robert W. Mikeals III

Name (Printed or typed)

2798 NW 27th Terrace

Address

Lake Panasoffkee, FL 33538

City, State & Zip

352-793-8092

Daytime Telephone number

sitedoctorsinc@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** Site Doctors Incorporated  
The name of the corporation shall be:

**ARTICLE II PRINCIPAL OFFICE**

Principal street address  
2798 NW 27th Terrace  
Lake Panasoffkee, FL 33538

Mailing address, if different is:

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:  
Any and all lawful business.

**ARTICLE IV SHARES**

The number of shares of stock is: 1,000,000

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Joshua J. Hall, CEO  
Address: 8166 CR 209  
Wildwood, FL 34785

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Name and Title: Robert W. Mikeals III, COO  
Address: 2798 NW 27th Terrace  
Lake Panasoffkee, FL 33538

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Name and Title: Deborah Mikeals, CFO  
Address: 2798 NW 27th Terrace  
Lake Panasoffkee, FL 33538

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

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

Name: Robert W. Mikeals III  
Address: 2798 NW 27th Terrace  
Lake Panasoffkee, FL 33538

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Robert W. Mikeals III  
Address: 2798 NW 27th Terrace  
Lake Panasoffkee, FL 33538

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

Robert W. Mikeals III  
Required Signature/Registered Agent

1/13/12  
Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Robert W. Mikeals III  
Required Signature/Incorporator

1/13/12  
Date

FILED  
12 FEB 17 PM 1:06  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA