

P12000019233

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

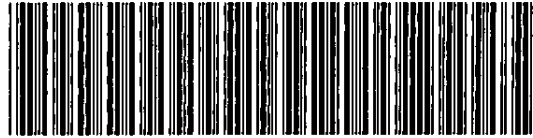
(Document Number)

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Certificates of Status \_\_\_\_\_

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12 FEB 24 AM 11:20

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

MRS  
2/27/12

## COVER LETTER

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

SUBJECT: OakLeaf Family Chiropractic, 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: Jeremy E Thompson

Name (Printed or typed)

9526 Arygle Forest Blvd. Suite B6

Address

Jacksonville, FL 32222

City, State & Zip

904-772-6522

Daytime Telephone number

oakleaffamilychiropracticinc@gmail.com

E-mail address: (to be used for future annual report notification)

**NOTE: Please provide the original and one copy of the articles.**

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12 FEB 24 AM 11:20

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

February 13, 2012

To Whom It May Concern:

I am writing to request the release of the corporate name OakLeaf Family Chiropractic, Inc. The corporation has been dissolved with no intention of forming again.

Thank you,

*Natalie E. Thompson*

Natalie E Thompson, VP, Registered Agent

904-501-8221

Notary:

*[Signature]*



Witness:

*Ashley Graham*  
Ashley Graham

**ARTICLES OF INCORPORATION**

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

**ARTICLE I NAME**

OakLeaf Family Chiropractic, Inc.

The name of the corporation shall be:

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

9526 Argyle Forest Blvd., Ste B6  
Jacksonville, FL 32222

Mailing address, if different is:

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:  
Chiropractic care office

**ARTICLE IV SHARES**

The number of shares of stock is: 1000

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

Name and Title: Jeremy E Thompson, President  
Address: 2062 Club Lake Drive  
Orange Park, FL 32065

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

Name and Title: Natalie E Thompson, Vice President  
Address: 2062 Club Lake Drive  
Orange Park, FL 32065

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

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

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

**ARTICLE VI REGISTERED AGENT**

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

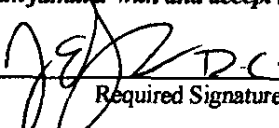
Name: Jeremy E Thompson  
Address: 2062 Club Lake Drive  
Orange Park, FL 32065

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Natalie E Thompson  
Address: 2062 Club Lake Drive  
Orange Park, FL 32065

*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*

  
Required Signature/Registered Agent

02/13/2012

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.*

  
Required Signature/Incorporator

02/13/2012

Date

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA