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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: Michael R. Renfrow M.D. P.A.
(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: Michael Renfrow
Name (Printed or typed)

8345 SW 81 Lane
Address

Miami FL 33143
City, State & Zip

(305) 502-1043
Daytime Telephone number

mrenfrow2@med.miami.edu
E-mail address: (to be used for future annual report notification)

mrenfrow@me.com

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: Michael R. Renfrow M.D. P.A.

ARTICLE II PRINCIPAL OFFICE

Principal street address
8755 SW 94 St Suite 200
Miami, FL 33176

Mailing address, if different is:
8345 SW 81 Lane
Miami, FL 33143

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Medicine; Surgery

ARTICLE IV SHARES

The number of shares of stock is: 1

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Michael Renfrow → Director/President
Address: 8345 SW 81 Lane
Miami, FL 33143

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

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: Michael Renfrow
Address: 8345 SW 81 Lane
Miami, FL 33143

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Michael Renfrow
Address: 8345 SW 81 Lane
Miami, FL 33143

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

Michael Renfrow
Required Signature/Registered Agent

3-01-2012
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.

Michael Renfrow
Required Signature/Incorporator

3-01-2012
Date

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