# **Electronic Articles of Incorporation For**

P13000024406 FILED March 08, 2013 Sec. Of State bmcknight

UNGER CHIROPRACTIC CLINIC, P.A.

The undersigned incorporator, for the purpose of forming a Florida profit corporation, hereby adopts the following Articles of Incorporation:

### Article I

The name of the corporation is: UNGER CHIROPRACTIC CLINIC, P.A.

# **Article II**

The principal place of business address:

1820 WELLNESS LANE TRINITY, FL. US 34655

The mailing address of the corporation is:

1820 WELLNESS LANE TRINITY, FL. US 34655

# **Article III**

The purpose for which this corporation is organized is: CHIROPRACTIC CLINIC

### **Article IV**

The number of shares the corporation is authorized to issue is: 500

# **Article V**

The name and Florida street address of the registered agent is:

STEPHEN J UNGER 1820 WELLNESS LANE TRINITY, FL. 34655

I certify that I am familiar with and accept the responsibilities of registered agent.

Registered Agent Signature: STEPHEN J. UNGER

# **Article VI**

The name and address of the incorporator is:

STEPHEN J. UNGER 1820 WELLNESS LANE

TRINITY, FL 34655

Electronic Signature of Incorporator: STEPHEN J. UNGER

I am the incorporator submitting these Articles of Incorporation and affirm that the facts stated herein are true. I am aware that 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. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of this corporation and every year thereafter to maintain "active" status.

#### **Article VII**

The initial officer(s) and/or director(s) of the corporation is/are:

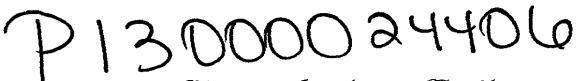
Title: P STEPHEN J UNGER 1820 WELLNESS LANE TRINITY, FL. 34655 US

### **Article VIII**

The effective date for this corporation shall be:

03/01/2013

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Douglas J. Amidon, P. A.

8606 Little Road New Port Richey, Florida 34654 (727) 834-9500; Fax (727) 834-9501

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March 13, 2013

Florida Department of State Division of Corporations Via Facsimile (850) 245-6804

Attn: Justin Shivers

#### **AFFIDAVIT**

I, Stephen J. Unger, do hereby swear and affirm that I have no intention of reinstating the dissolved/revoked corporation known as Unger Chiropractic Clinic, LLC, Document Number L08000117675.

STATE OF FLORIDA COUNTY OF PASCO

BEFORE ME, the undersigned authority, personally appeared Affiant Stephen J. Unger who, being duly sworn, deposes and says that the foregoing Affidavit is true.

SWORN TO and subscribed before me this \_\_\_\_\_\_ day of March, 2013.

Affiant is personally known to me or has produced the following type of identification:



Wodary Signature

Linda Scarbrough
Printed Name
My Commission Expires:
March 29, 2014