

P14000016722

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
2014 FEB 21 AM 11:27

11H

COVER LETTER

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

SUBJECT: Island Coast O+P, 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: Joshua Ryder

Name (Printed or typed)

21216 Olean Blvd, Suite 1

Address

Port Charlotte FL 33952

City, State & Zip

941-629-9689

Daytime Telephone number

mgb-OandP@live.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)

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ARTICLE I NAME

The name of the corporation shall be: Island Coast O+P, Inc.

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ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

21216 Olean Blvd.

Suite 1

Port Charlotte, FL 33952

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To function as a "DBA" for

Joshua Ryder's other two corporations: Island

Coast Orthopedics, Inc., document number P96000050084,

and O.P. Associates of Charlotte County, Inc., document

number S49097, which provide prosthetics and orthotics
to patients.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:

Joshua C. Ryder, President

Name and Title:

Address

21216 Olean Blvd

Address:

Suite 1

Port Charlotte, FL 33952

Name and Title:

Arlene O. Ryder, VP

Name and Title:

Address

2003 NE 3rd Street

Address:

Cape Coral, FL 33909

Name and Title:

Name and Title:

Address

Address:

(conti.)

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Name and Title: _____ Name and Title: _____
Address _____ Address: _____

ARTICLE VI REGISTERED AGENT

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

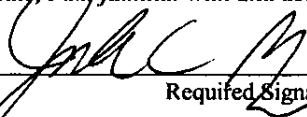
Name: Joshua C. Ryder
Address: 21216 Olean Blvd, Suite 1
Port Charlotte, FL 33952

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Marjorie G. Bowles
Address: 21216 Olean Blvd, Suite 1
Port Charlotte, FL 33952

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

2/19/14
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

2/19/14
Date