

P14000054649

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

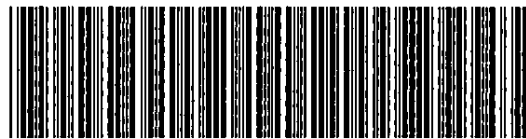
(Document Number)

Certified Copies _____ Certificates of Status _____

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B. 6/24/14



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RECEIVED
SECRETARY OF STATE
DIVISION OF CORPORATE AFFAIRS
JUN 23 PM 1:25

COVER LETTER

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

SUBJECT: _____

ON CALL SPECIALISTS, 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: _____

EDWARD SHAHEEN

Name (Printed or typed)

12828 DOWNSTREAM CIRCLE

Address

ORLANDO, FL 32828

City, State & Zip

(757) 310-3809

Daytime Telephone number

mdetch@aol.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

The name of the corporation shall be:

ON CALL SPECIALISTS, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

12828 DOWNSTREAM CIRCLE

P.O. Box 4210

SUITE A

MONROE, LA 71211

ORLANDO, FL 32828

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY LEGAL ACTIVITY

ARTICLE IV SHARES

The number of shares of stock is:

1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:

EDWARD SHAHEEN

Name and Title:

PRESIDENT
DIRECTOR

Address

Address:

12828 DOWNSTREAM CIR

ORLANDO, FL 32828

Name and Title:

Name and Title:

Address

Address:

Name and Title:

Name and Title:

Address

Address:

JUN 23 PM 1:25

SECRETARY
DIVISION OF CORPORATIONS

(conti.)

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:

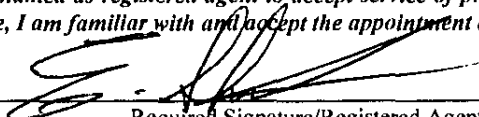
Name: EDWARD SHAHEEN
Address: 12828 DOWNSTREAM CIRCLE
ORLANDO, FL 32828

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

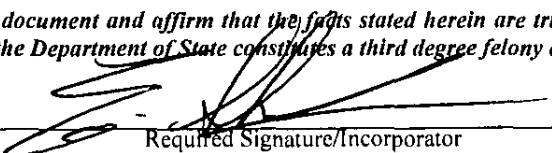
Name: EDWARD SHAHEEN
Address: 12828 DOWNSTREAM CIRCLE
ORLANDO, FL 32828

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

6/17/14
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

6/17/14
Date

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SECRETARY OF STATE
DIVISION OF CORPORATIONS