

P14000100938

(Requestor's Name)

(Address)

**(Address)**

(City/State/Zip/Phone #)

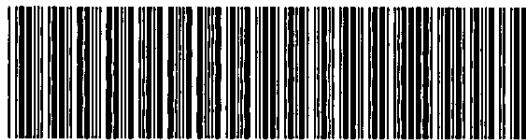
PICK-UP     WAIT     MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

**Special Instructions to Filing Officer:**



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12/01/14--01027--014 \*\*70.00

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Office Use Only

W14-72258

2 12/19/14



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

December 4, 2014

RECEIVED

14 DEC 18 AM 11:29

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

LAURIE BABCOCK  
1903 SE 2ND STREET  
CAPE CORAL, FL 33990

SUBJECT: TARGET THERAPY SERVICES, INC.  
Ref. Number: W14000072258

We have received your document for TARGET THERAPY SERVICES, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

If your business entity does not intend to transact business until January 1st of the upcoming calendar year, you may wish to revise your document to include an effective date of January 1st. If you do not list an effective date of January 1st, your business entity will become effective this calendar year and it will be required to file an annual report and pay the required annual report fee for the upcoming calendar year this coming January, which is merely weeks away. By listing an effective date of January 1st, the entity's existence will not begin until January 1st of the upcoming year and will, therefore, postpone the entity's requirement to file an annual report and pay the required annual report filing fee until the following calendar year.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Thomas Chang  
Regulatory Specialist II  
New Filing Section

Letter Number: 714A00025506

*As recommended by Above Reg Spec Thomas Chang  
Changed Article IV from 100.00 to 100.*

*thx*

## COVER LETTER

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

**SUBJECT: TARGET THERAPY SERVICES, 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       \$78.75  
Filing Fee      Filing Fee  
                    & Certificate of Status

\$78.75       \$87.50  
Filing Fee      Filing Fee,  
                    & Certified Copy      Certified Copy  
                    & Certificate of      & Certificate of  
                    Status      Status

**ADDITIONAL COPY REQUIRED**

FROM: LAURIE BABCOCK  
Name (Printed or typed)

1903 SE 2ND STREET  
Address

CAPE CORAL, FL 33990  
City, State & Zip

239-218-3546  
Daytime Telephone number

BABCOCK207@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)

**ARTICLE I NAME**

The name of the corporation shall be: TARGET THERAPY SERVICES, INC.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

1903 SE 2ND STREET

CAPE CORAL, FL 33990

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS.

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DIVISION

**ARTICLE IV SHARES** 100

The number of shares of stock is: \_\_\_\_\_

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

Name and Title: LAURIE BABCOCK, DIRECTOR/PRESIDENT

Name and Title: JESSE BABCOCK, OFFICER

Address

1903 SE 2ND STREET

Address:

1903 SE 2ND STREET

CAPE CORAL, FL 33990

CAPE CORAL, FL 33990

Name and Title: N/A

Name and Title: N/A

Address

\_\_\_\_\_

Address:

\_\_\_\_\_

Name and Title: N/A

Name and Title: N/A

Address

\_\_\_\_\_

Address:

\_\_\_\_\_

(cont.)

Name and Title: N/A Name and Title: N/A  
Address: \_\_\_\_\_ Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

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

Name: WIEBEL, HENNELS, & CARUFE, PLLC  
Address: 9420 BONITA BEACH ROAD  
BONITA SPRINGS, FL 34135

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**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: LAURIE BABCOCK  
Address: 1903 SE 2ND STREET  
CAPE CORAL, FL 33990

*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*

W. Wiebel  
\_\_\_\_\_  
Required Signature/Registered Agent

11/20/14  
\_\_\_\_\_  
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.*

Laurie D. Babcock  
\_\_\_\_\_  
Required Signature/Incorporator

11/20/2014  
\_\_\_\_\_  
Date