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(Business Entity Name)

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WHS-1746

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

15 FEB 20 AM 10:44

APPROVED
AND
FILED

COVER LETTER

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

(Existing FIN # 52-2314626)

SUBJECT: CYNTHIA BAILEY, PC professional corp
(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
 Status

ADDITIONAL COPY REQUIRED

FROM: CYNTHIA M. BAILEY
Name (Printed or typed)

5213 NAPOLI RIV
Address

BAADENTON, FL 34211
City, State & Zip

301-801-0887
Daytime Telephone number

cmagbai57@gmail.com
E-mail address: (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the articles.



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 9, 2015

CYNTHIA M. BAILEY
5213 NAPOLI RUN
BRADENTON, FL 34211

SUBJECT: CYNTHIA BAILEY, PC
Ref. Number: W15000001746

We have received your document for CYNTHIA BAILEY, PC and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The only acceptable words for designation as a professional association are PROFESSIONAL ASSOCIATION, P.A., and CHARTERED.

The registered agent must have a Florida street address. A post office box is not acceptable.

You must list at least one incorporator with a complete business street address.

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.

Valerie Herring
Regulatory Specialist II
New Filing Section

Letter Number: 015A00000499



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 5, 2015

CYNTHIA M. BAILEY
5213 NAPOLI RUN
BRADENTON, FL 34211

SUBJECT: CYNTHIA BAILEY, PC
Ref. Number: W15000001746

We have received your document for CYNTHIA BAILEY, PC and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

****Please remove the "PC" from your entity name. ****

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.

Valerie Herring
Regulatory Specialist II
New Filing Section

Letter Number: 015A00000499

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

APPROVED
AND
FILED

ARTICLE I NAME

The name of the corporation shall be: Cynthia Bailey PA

ARTICLE II PRINCIPAL OFFICE

Principal street address

15 FEB 20 AM 10:45
Mailing address, if different is:

5213 Napoli Run
Bradenton FL 34211

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: pain relief consulting services

Certified registered nurse anesthetist

ARTICLE IV SHARES

The number of shares of stock is: 1,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Cynthia Bailey President Name and Title: _____

Address 5213 Napoli Run Address: _____
Bradenton FL 34211

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

APPROVED
AND
FILED

15 FEB 20 AM 10:45

ARTICLE VI REGISTERED AGENT

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

Name: CYNTHIA M. BAILEY

Address: 5213 Napoli Run
Bradenton FL 34211

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: CYNTHIA M. BAILEY

Address: 5213 Napoli Run
Bradenton FL 34211

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

Cynthia M. Bailey
Required Signature/Registered Agent

1/4/15
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.

Cynthia M. Bailey
Required Signature/Incorporator

1/4/15
Date