

Division of Corporations

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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850) 617-6381

From:

Account Name : LEGALZOOM.COM INC.
Account Number : I20010000062
Phone : (323) 962-8600
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TALLAHASSEE, FLORIDA

2015 JUN 26 AM 10:29

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****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

**FLORIDA PROFIT/NON PROFIT CORPORATION
PETER H. GACH M.D., P.A.**

Certificate of Status	0
Certified Copy	1
Page Count	06
Estimated Charge	\$78.75

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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COVER LETTER

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

SUBJECT: PETER H. GACH M.D., P.A.(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:** Cheyenne Moseley, Legalzoom.com, Inc.Name (Printed or typed)100 W. Broadway, Suite 100AddressGlendale, CA 91210City, State & Zip323-962-8600 ext. 7625Daytime Telephone number**NOTE:** Please provide the original and one copy of the articles.

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PETER H. GACH, M.D.
GASTROENTEROLOGY, DISEASES OF THE LIVER

FILED
2015 JUN 26 AM 10:29
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JUNE 11, 2015

TO WHOM IT MAY CONCERN:

I am filing papers to dissolve the entity: Peter H Gach, MD, LLC.

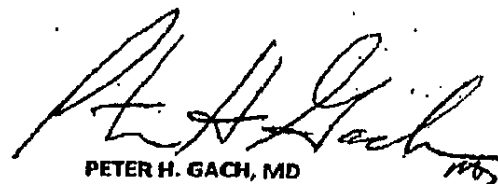
Document # L06000086144

This letter is to serve as consent to dissolve the LLC and also to state that I have no intention to revoke the dissolution.

I release the name to be used as a P.A.

I can be reached at tele. 954-968-3330 or via e mail: harvey1881@aol.com with any questions.

Thank you for your assistance.


PETER H. GACH, MD

2825 N. STATE ROAD 7, SUITE 202 - MARGATE, FL 33083
PHONE: 954-968-3330 - FAX: 954-968-3332

H150001579543

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:

PETER H. GACH M.D., P.A.

ARTICLE II PRINCIPAL OFFICEThe principal street address and mailing address, if different is:

2825 NORTH STATE RD. 7, MARGATE, FL 33063

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

MEDICAL DOCTOR

ARTICLE IV SHARES

The number of shares of stock is:

7,500

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

PETER H. GACH, MD
 President, Treasurer, Secretary & Director
 2825 NORTH STATE RD. 7
 MARGATE, FL 33063

ARTICLE VI REGISTERED AGENTThe name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

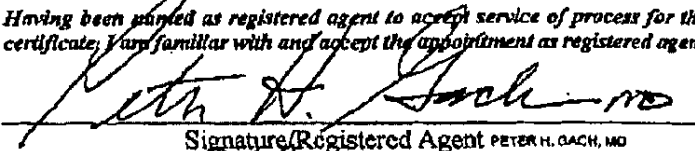
PETER H. GACH, MD

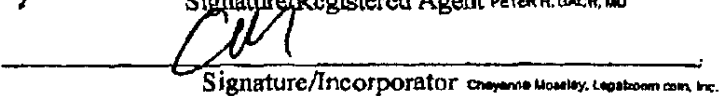
2825 NORTH STATE RD. 7, MARGATE, FL 33063

ARTICLE VII INCORPORATORThe name and address of the Incorporator is:

Cheyenne Moseley, Legalzoom.com, Inc., 101 N. Brand Blvd., 11th Floor, Glendale, CA 91203

 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


 Signature/Registered Agent PETER H. GACH, MD


 Signature/Incorporator Cheyenne Moseley, Legalzoom.com, Inc.

6/25/15
 Date
6-26-15
 Date