## P/700004/990

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SECRETARY OF STATE
ALLAHASSEE, FLORIDA

05/11/17

W17-020520



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## FLORIDA DEPARTMENT OF STATE Division of Corporations NEORMATION SERVICES

March 10, 2017

STEPHANIE LAMM 10100 BAYMEADOWS RD., APT. 402 JACKSONVILLE, FL 32256

SUBJECT: STEPHANIE M. LAMM, PA-C, P.A.

Ref. Number: W17000020520

We have received your document for STEPHANIE M. LAMM, PA-C, P.A. and your check(s) totaling \$78.75. 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.

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: 717A00004710

## **COVER LETTER**

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

SUBJECT:	Hephanie M. Lamn (PROPOSED CORPORA	n, PA-C, P.A.	UDE GHOOW
	(PROPOSED CORPORA	ATE NAME – <u>MUST INCL</u>	<u>ude suffix</u> )
Enclosed are an orig	inal and one (1) copy of the art	ticles of incorporation and	d 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 CO	DPY REQUIRED
FROM:	Stephanie M. La	âmyM	
			1100
	_10100 Baymea		402
	Jacksonville F	FL 31256 , State & Zip	
	(904) 864- Daytime 1		
	<b>.</b>		
	St. lamm() E-mail address: (to be use	hotmail. com	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)

The name of the corporation shall be: Stephani	e M. Lamm, PA-C, P.A.	
ARTICLE II PRINCIPAL OFFICE Principal street address	Mailing address, if different is:	
10 100 Baymeadows Dd, Apt 402		
Jacksonville, FL 32256		
	to work as an independently	
contracted certified phys		
provide healthcare in Flor	·dc	
	TE A	
	33 -	-
	Fig. 2	
ARTICLE IV SHARES The number of shares of stock is:	AM 9: 06	
ARTICLE V INITIAL OFFICERS ANDIOR DIREC	<u>TORS</u>	
Name and Title: Stephanie U. Lamm	PA-C Name and Title:	
Address 10100 Baymendows		
Jacksonville, FL 32		<b></b>
Name and Title:	Name and Title:	
Address		
ranos	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
		-
<del></del>		<del></del>
Name and Title:	Name and Title:	
Address		

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: Stephanic M. Lamm, PA-C				
Address: 10100 Baymeadows Rd, Apt 402	- CTA ( a)			
Address: 10/100 Baymeadows Rd, Apt 402  Jacksonville, FL 32256	FI MAY 10 ECHETARY LLAHASSE			
ARTICLE VII INCORPORATOR	F 4 5			
The name and address of the Incorporator is:	1 9: 06			
Name: Shophanic M. Lann, PA-C	10 de la 10			
Name: Shaphanic M. Lann, PAC  Address: 10100 Baymendows Rd, Apl	402			
Jacksonville, FL 32256	-			
ARTICLE VIII EFFECTIVE DATE: Effective date, if other than the date of filing:	(OPTIONAL)			
(If an effective date is listed, the date must be specific and canno filing.)				
Note: If the date inserted in this block does not meet the applicable the document's effective date on the Department of State's records.	statutory filing requirements, this date will not be listed as			
ale document a crice are an are Expandient of State S records.				
Having been named as registered agent to accept service of process this certificate, I am familiar with and accept the appointment as reg				
Elylin Jam PA-C	5/6/17			
Required Signature/Registered Agent	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.				
\\ /\	5/L/17			
Styling Lun PA-C Required Signature/Incorporator	Date			

. . . . . . .