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Florida Department of State
Division of Corporations
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To:

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

From:

Account Name : WILSON TAX & ACCOUNTING INC.
Account Number : I20150000107
Phone : (941)625-1925
Fax Number : (941)625-1526

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

Email Address: sarahmbowdell@verizon.net

FLORIDA PROFIT/NON PROFIT CORPORATION

Sarah M Dixon-Bowdell P.A.

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$70.00

2019 JUN 17 AM 9:37

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JUN 18 2019

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: Sarah M Dixon-Bowdell P.A.

ARTICLE II PRINCIPAL OFFICEPrincipal ~~street~~ address

Mailing address, if different is:

3914 E State Road 64

1300 Enterprise Dr Ste D

Bradenton, FL 34208

Port Charlotte, FL 33953

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Advanced Practice Registered Nurse

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Sarah M. Dixon-Bowdell

Name and Title: _____

Address: President

Address: _____

1300 Enterprise Dr Ste D

Port Charlotte, FL 33953

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

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J. B. BARNETT
CLERK OF COURT

Name and Title: _____	Name and Title: _____
Address _____	Address: _____
_____	_____
_____	_____

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

Name: Sarah M. Dixon-Bowdell

Address: 1300 Enterprise Dr Ste D
Port Charlotte, FL 33953

ARTICLE VII INCORPORATORThe name and address of the Incorporator is:

Name: Sarah M. Dixon-Bowdell

Address: 1300 Enterprise Dr Ste D
Port Charlotte, FL 33953

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 cannot be more than five days prior or 90 days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.*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*

Sarah M Dixon-Bowdell APRN, PC/MD BC 6/13/2019
 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.

Sarah M Dixon-Bowdell APRN, PC/MD BC 6/13/2019
 Required Signature/Incorporator Date