Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

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0 AUG, 10 AM 10:

FLORIDA PROFIT/NON PROFIT CORPORATION T SANTIESTEBAN APRN,PA

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

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

ARTICLE I NAME	Li	^
The name of the corporation shall be: TSanTO	esteban APRN.	PA
ARTICLE II PRINCIPAL OFFICE		7 7 1
The principal place of business/mailing address is:		
Principal street address		
	Mailing add	ress, if different is:
12022 311) 77 torran		
12/33 SW TYTERACL		
Mianu, M 33/83		_
ARTICLE III PURPOSE		
The purpose for which the corporation is organized is:	• •	
•		
		
ADVANCED PRACTICE &	PEDISTEREN	NIUDSE
	C TO TO TO TO TO	10000
		20
ARTICLE IV SHARES		20 AUG ALLAHA
The number of shares of stock is:		••
ARTICLE V INITIAL OFFICERS AND/OR DI	RECTORS	
To Can Fretal	(PRESIDENT)	2
, y ,	Mame and inte:	
Address: 1202 SW 77 Terra	Address:	37 50A
1/10 mi Il 33/8	<u></u>	
MILENNY TI SIN		- <u> </u>
Name and Title:	Name and Title:	
Address:	Address:	
	-	
Name and Title:	Name and Title:	
Address:	Address:	

ARTIC.	LE VI REGISTERED AGENT
The <u>nam</u>	te and Florida street address (P.O. Box NOT acceptable) of the registered agent is:
Name:	Tamaia Pantiletellan
Address:	LOGIA SW TY TELLACE
	Mismi, Fl 33183
ARTICI	E VII INCORPORATOR
The name	e and address of the Incorporator is:
Name:	TAMARA SANTIESTEBAN
Address:	12022 SW 77 TERR.
	MIGMI FL 33183

Havina ha	PPPPPPPPPPPPPPPPPPPPPPPPPPPPPPPPPPPPP
this certific	en named as registered agent to accept service of process for the above stated corporation at the place designated in cate, I am familiar with and accept the appointment as registered agent and accept the above stated agent and accept the appointment as registered agent and accept the appointment as a registered agent and accept the appointment as a registered agent and accept the acceptance and accept the acceptance and acceptance are acceptance.
	cate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity
X	ANI SANI
	Herming Signature Marian IA
	Requised Signature/Registered Agent Date
I submit th	is document and affirm that the facts stated herein are true. I am aware that any false information submitted in a
document i	to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.
*	TAH) - 7BO/2020
	Required graduite/Incorporator Date

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