

**P2100000853**Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.**

(((H21000005926 3)))



H210000059263ABCZ

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.**

## To:

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

## From:

Account Name : ALEXANDER ALMONTE, ESQ/I INCORPORATE LTD.  
Account Number : I20070000019  
Phone : (518)689-1212  
Fax Number : (518)432-0742

**\*\*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**  
**Family Wellness Medical P.A.**

|                       |         |
|-----------------------|---------|
| Certificate of Status | 0       |
| Certified Copy        | 1       |
| Page Count            | 01      |
| Estimated Charge      | \$78.75 |

FILED

2021 JAN -6 PM 1:44

2021 JAN -6 AM 11:09

# 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:

***Family Wellness Medical P.A.***

## **ARTICLE II PRINCIPAL OFFICE**

The principal place of business and mailing address of this corporation shall be:

***1865 South Ocean Drive Suite 12K, Hallandale Beach, FL 33009***

## **ARTICLE III PURPOSE**

The purpose for which this corporation is organized is:

***The Profession of Medicine***

## **ARTICLE IV SHARES**

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

***200 No Par Value***

## **ARTICLE V INITIAL DIRECTORS/OFFICERS AND STREET ADDRESS**

The name and address of the initial directors/officers is:

***Zoya Koroleva, President, 1865 South Ocean Drive Suite 12K, Hallandale Beach, FL 33009***

## **ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS**

The name and address of the initial registered agent is:

***Zoya Koroleva, 1865 South Ocean Drive Suite 12K, Hallandale Beach, FL 33009***

## **ARTICLE VII INCORPORATOR(S)**

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

***Zoya Koroleva, President, 1865 South Ocean Drive Suite 12K, Hallandale Beach, FL 33009***

Having been named as registered agent to accept service of process for the above stated corporation at the place designed in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

January 6, 2021

***s/ Zoya Koroleva***  
Zoya Koroleva  
***Registered Agent***

***s/ Zoya Koroleva***  
Zoya Koroleva  
***Incorporator / President***

2021 JAN -6 PM 1:44  
FILED