

# **Electronic Articles of Incorporation For**

P21000014080  
FILED  
February 16, 2021  
Sec. Of State  
dlokeefe

PRIMARY PLUS OCCUPATIONAL HEALTH CARE INC.

The undersigned incorporator, for the purpose of forming a Florida profit corporation, hereby adopts the following Articles of Incorporation:

## **Article I**

The name of the corporation is:

PRIMARY PLUS OCCUPATIONAL HEALTH CARE INC.

## **Article II**

The principal place of business address:

3599 UNIVERSITY BLVD S  
STE #404  
JACKSONVILLE, . US 32216

The mailing address of the corporation is:

12243 RIDGE FOREST LN.  
STE #404  
JACKSONVILLE, FL. US 32246

## **Article III**

The purpose for which this corporation is organized is:

ANY AND ALL LAWFUL BUSINESS.

## **Article IV**

The number of shares the corporation is authorized to issue is:

1

## **Article V**

The name and Florida street address of the registered agent is:

ELIZABETH JAHJAH P  
3599 UNIVERSITY BLVD S  
STE #404  
JACKSONVILLE, FL. 32246

I certify that I am familiar with and accept the responsibilities of registered agent.

Registered Agent Signature: ELIZABETH JAHJAH

P21000014080  
FILED  
February 16, 2021  
Sec. Of State  
dlokeefe

## **Article VI**

The name and address of the incorporator is:

ELIZABETH JAHJAH  
12243 RIDGE FOREST LN.

JACKSONVILLE, FL 32246

Electronic Signature of Incorporator: ELIZABETH JAHJAH

I am the incorporator submitting these Articles of Incorporation and affirm that the facts stated herein are true. I am aware that 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. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of this corporation and every year thereafter to maintain "active" status.

## **Article VII**

The initial officer(s) and/or director(s) of the corporation is/are:

Title: P  
ELIZABETH JAHJAH  
12243 RIDGE FOREST LN.  
JACKSONVILLE, FL. 32246 US