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COVER LETTER

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

SUBJECT: _____

HWA Mobile Anesthesia, P.A.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and 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 COPY REQUIRED

FROM: _____

Harry W. Acevedo
Name (Printed or typed)

7283 NE 22nd Court Rd
Address

Ocala, FL, 34479
City, State & Zip

(352) 316-0501
Daytime Telephone number

hwaanesthesia@gmail.com
E-mail address: (to be used for future annual report 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)

ARTICLE I NAME

The name of the corporation shall be: HWA Mobile Anesthesia, P.A.

ARTICLE II PRINCIPAL OFFICE

Principal ~~street~~ address
7283 NE 22nd Court Rd
Ocala, FL 34479

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Provide anesthesia care for
patients undergoing medical, dental and outpatient
procedures.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Harry W. Acevedo (President) Name and Title: _____

Address: 7283 NE 22nd Court Rd Address: _____

Ocala FL 34479

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ 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: Harry W. Acevedo

Address: 7283 NE 22nd Court Rd
Ocala, FL 34479

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: Harry W. Acevedo

Address: 7283 NE 22nd Court Rd
Ocala FL 34479

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ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 11/01/2021 (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



Required Signature/Registered Agent

11/01/2021

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.



Required Signature/Incorporator

11/01/2021

Date