

P210004526603796
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.

(((H21000452660 3)))



H210004526603ABC-

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 : VAN WINKLE & SAMS, P.A.
Account Number : I20030000032
Phone : (941)923-1685
Fax Number : (941)923-0174

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

Email Address: YourLawyer@gmail.com

DOMESTICATION

NANCY CARLSON FISHER M.D. P.C., INC

| | |
|-----------------------|----------|
| Certificate of Status | 0 |
| Certified Copy | 0 |
| Page Count | 05 |
| Estimated Charge | \$120.00 |

Electronic Filing Menu

Corporate Filing Menu

Help

(((H21000452660 3)))

COVER LETTER

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

SUBJECT: Nancy Carlson Fisher M.D. P.C., Inc.

Enclosed is an original and one (1) copy of the Articles of Domestication and a check:

FEES:

| | |
|--|----------|
| Certificate of Domestication | \$ 50.00 |
| Articles of Incorporation and Certified Copy | \$ 78.75 |
| Total filing fee | \$128.75 |

OPTIONAL:

| | |
|-----------------------|---------|
| Certificate of Status | \$ 8.75 |
|-----------------------|---------|

From: Laurie B. Sams, Esquire

Name (printed or typed)

3859 Bee Ridge Road, Suite 202

Address

Sarasota, FL 34233

City, State & Zip

941-923-1685

Daytime Telephone Number

your1attorney@gmail.com

E-mail address: (to be used for future annual report notification)

INH53 (3/20)

(((H21000452660 3)))

2021 DEC 13 11:49 AM

(((H21000452660 3)))

Articles of Domestication
Foreign Corporation Domesticating to Florida

The undersigned, Nancy Carlson, M.D. President
(Name) (Title)

of Nancy Carlson Fisher M.D. P.C., a foreign
corporation, in accordance with s. 607.11922, Florida Statutes, submit these Articles of
Domestication.

1. Then name of the domesticating corporation is Nancy Carlson Fisher M.D. P.C.
(Foreign Corporation)
2. The jurisdiction and date of its formation is Vermont, May 29, 2003
3. The name of the domesticated corporation is Nancy Carlson Fisher M.D. P.C., Inc.
4. The jurisdiction of formation of the domesticated corporation is **Florida**
The Effective Date of the Domestication shall be January 1, 2022.
5. The domestication corporation is a foreign corporation and the domestication was
approved in accordance with its organic law.
6. Attached are Florida Articles of Incorporation to complete the domestication
requirements pursuant to s.607.0202, F.S.

I certify I am authorized to sign these Articles of Domestication on behalf of the corporation.

Nancy
(Authorized Signature)

2021 DEC 13 11:46:00

(((H21000452660 3)))

(((H21000452660 3)))

ARTICLES OF INCORPORATION
IN COMPLIANCE WITH CHAPTER 607, F.S.

ARTICLE I NAME

THE NAME OF THE CORPORATION SHALL BE:

Nancy Carlson Fisher M.D. P.C., Inc.

ARTICLE II PRINCIPAL OFFICE

THE PRINCIPAL PLACE OF BUSINESS/ MAILING ADDRESS IS:

Principal Address

10201 Arcos Avenue

Suite 103

Estero FL 33928

Mailing Address

10201 Arcos Avenue

Suite 103

Estero FL 33928

ARTICLE III PURPOSE

THE PURPOSE FOR WHICH THE CORPORATION IS ORGANIZED:

medical office providing Gynecology and women's health services, female rejuvenation, laser hair and vein services, injectables and cool-sculpting/body-sculpting services, and any and all other lawful business.

ARTICLE IV SHARES

THE NUMBER OF SHARES OF STOCK IS: 100

ARTICLE VI REGISTERED AGENT AND STREET ADDRESS

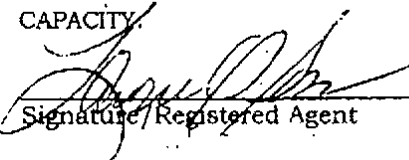
THE NAME AND FLORIDA STREET ADDRESS (P.O. BOX NOT ACCEPTABLE) OF THE REGISTERED AGENT IS:

Laurie B. Sams, Esquire

3859 Bee Ridge Road, Suite 202

Sarasota, FL 34233

HAVING BEEN NAMED AS REGISTERED AGENT AND 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.


Signature/Registered Agent12/10/2012
Date

2021 DEC 13 PM 5:30

(((H21000452660 3)))

(((H21000452660 3)))

ARTICLE V DIRECTORS AND/ OR OFFICERS**THE NAME(S) AND ADDRESS(ES) AND SPECIFIC TITLES:**Name & Title: Nancy Carlson, PresidentAddress: 10201 Arcos AvenueSuite 103Estero, FL 33928

Name & Title: _____

Address: _____

Name & Title: _____

Address: _____

Name & Title: _____

Address: _____

Name & Title: _____

Address: _____

Name & Title: _____

Address: _____

Name & Title: _____

Address: _____

Name & Title: _____

Address: _____

I submit this document 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.

Nancy Carlson
Signature/Authorized Person12/18/2021
Date

(((H21000452660 3)))

(((H21000452660 3)))

STATE OF VERMONT
OFFICE OF SECRETARY OF STATE

Certificate of Good Standing

I, James C. Condos, Vermont Secretary of State, do hereby certify that according to the records of this office

NANCY CARLSON FISHER M.D. P.C.

a Domestic Profit Corporation formed under the laws of the State of VERMONT, was filed for record in this office on May 29, 2003.

I further certify that the company has perpetual duration, that its most recent annual report is on file, and that as of this date, articles of dissolution/ withdrawal have not been filed.

July 25, 2018

Given under my hand and the seal of the State of Vermont, at Montpelier, the State Capital.



A handwritten signature in cursive script that reads "James C. Condos".

James C. Condos
Vermont Secretary of State

Business ID: 0124253

Certificate Number: 2013491121002

(((H21000452660 3)))



Vermont Secretary of State
ARTICLES OF DOMESTICATION
 of a Domesticating or Domesticated Profit Corporation

File No.: _____

Business ID: _____

a. **RETURN ACKNOWLEDGEMENT TO:** Required - Name and Address.Laurie B. Sams, Esquire

Name

3859 Bee Ridge Road, Suite 202

Address

Sarasota, FL 34233

Address

Address

Processed by: _____

FOR OFFICE USE ONLY

Please review instructions page before beginning.
 This document must be typewritten or printed (11A V.S.A. § 1.20).

ARTICLE I. STATEMENT OF DOMESTICATION: Required.

The following corporation is hereby domesticated from the jurisdiction provided in Article II below into the jurisdiction listed in Article III below. Said corporation has approved this domestication as required by the governing statute of the jurisdiction to which it is domesticating as provided in Article III.

ARTICLE II. CORPORATION BEFORE DOMESTICATION Required - The Corporation in existence prior to this domestication.a. **BUSINESS NAME:** Required NANCY CARLSON FISHER M.D. P.C.b. **JURISDICTION:** Required - Select One:☒ **Vermont:**☐ **Other:** If Selected- U.S. State or Non-U.S. Country _____c. **EFFECTIVE DATE OF DOMESTICATION IN THIS JURISDICTION:** RequiredMay 29, 2003**ARTICLE III. CORPORATION AFTER DOMESTICATION:** Required - the corporation in existence following this domestication.a. **BUSINESS NAME:** Required NANCY CARLSON FISHER M.D. P.C, INC.b. **JURISDICTION:** Required - select one (1):☐ **Vermont.**

The domesticating corporation will be a domestic corporation, therefore articles of incorporation pursuant to 11A V.S.A. § 2.02 are enclosed in accordance with 11A V.S.A. § 11.15(b)(1).

☒ **Other:** U.S. State or Non-U.S. Country FloridaIf selected - Must select one (1) of the following: *cont. on next page*

☐ The domesticating corporation will be a foreign corporation authorized to transact business in this State, an application for a certificate of authority pursuant to 11A V.S.A. § 15.03 is enclosed. 11A V.S.A. § 11.15(b)(2).



Vermont Secretary of State
ARTICLES OF DOMESTICATION
of a Domesticating or Domesticated Profit Corporation

- ☒ The domesticating corporation will be a foreign corporation that is not authorized to transact business in this State, the Secretary of State may use the following for service of process pursuant to 11A V.S.A. § 5.04(b):

a. Name: Kathleen Boe

b. Street Address: 64 Court Street

City/Town: Middlebury State: VT ZIP Code: 05753

b. Mailing Address: 64 Court Street

City/Town: Middlebury State: VT ZIP Code: 05753

ARTICLE IV. EFFECTIVE DATE OF DOMESTICATION: Optional January 1, 2022

ARTICLE V. EXECUTION: Required

I hereby certify, under penalty of law or perjury (11A V.S.A. § 1.29 & 13 V.S.A. § 2904), that all above statements and information are accurate, and is provided with the required documents attached, with any requisite statutory fees for attached documents, a self-addressed stamped envelope, and a check or money order for \$20.00 (11 V.S.A. § 4012(18)) made payable to "VT SOS."

Printed Name Of Authorizer

Required - Must be an officer or director of corporation.

Signature

Date