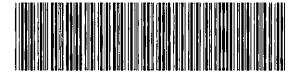
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(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



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As Illacit

-Incorporating Services, Ltd.

1540 Glenway Drive Tallahassee, FL 32301

850.656.7956 Fax: 850.656.7953 www.incserv.com

e-mail: accounting@incserv.com

850-245-6051

incserv."

ORDER FORM

Florida Department of State
The Centre of Tallahassee
2415 North Monroe Street, Suite 810
Tallahassee, FL 32303
corphelp@dos.myflorida.com

FROM Melissa Moreau mmoreau@incserv.com 850.656.7953

REQUEST DATE	4/28/2022	PRIORITY	Regular Approval
ORDER ENTITY			

OUR REF # (Order ID#) 1032455

K & N MEDICAL MANAGEMENT GROUP, INCORPORATED

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			I AFFAIIT	110 2517176	

K & N MEDICAL MANAGEMENT GROUP, INCORPORATED (FL)

New corp filing

NOTES:

\$70.00 Authorized

Email address for annual report reminders: fred@myvanguard.net

RETURN/FORWARDING INSTRUCTIONS:

ACCOUNT NUMBER: I20050000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Sincerely,

Please bill us for your services and be sure to include our reference number on the invoice and courier package if applicable. For UCC orders, please include the thru date on the results.

Thursday, April 28, 2022 Page 1 of 1

ARTICLES OF INCORPORATION

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

CLE I NAME ame of the corporation shall be: K & N Medical Management Group, Inco CLE II PRINCIPAL OFFICE Principal street address N. University Drive, Suite 603			Mailing address, if different is:	
prings, FL 330	67			
LE III PURF	OSE the corporation is organized is:	activity	2077 S = 4	 -
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	SES Two Hundred (200) No Par Value f stock is:	c 		
LE V INITI	AL OFFICERS AND/OR DIRECTORS e: Navin M. Seodarsan, President & Dire	ctor Name and Title	Subramany S. Reddy, Vice Pres	sident &
LE V INITI	AL OFFICERS AND/OR DIRECTORS e: Navin M. Seodarsan, President & Dire	ctor Name and Title	Subramany S. Reddy, Vice Pres 24 Olivia Road	sident &
<i>EV INITE</i> Name and Titl	AL OFFICERS AND/OR DIRECTORS	ctor Name and Title Address:		sident &
EV INITE Name and Titl Address	AL OFFICERS AND/OR DIRECTORS Navin M. Seodarsan, President & Dire 21 Susan Lane Dix Hills, NY 11746	ctor Name and Title Address:	24 Olivia Road Hightstown, NJ 08520	
EV INITE Name and Title Address	e: Navin M. Seodarsan, President & Dire 21 Susan Lane Dix Hills, NY 11746	ctor Name and Title Address: Name and Title	24 Olivia Road Hightstown, NJ 08520	
Address	AL OFFICERS AND/OR DIRECTORS Navin M. Seodarsan, President & Dire 21 Susan Lane Dix Hills, NY 11746	ctor Name and Title Address:	24 Olivia Road Hightstown, NJ 08520	
E V INITE Name and Title Address	AL OFFICERS AND/OR DIRECTORS Navin M. Seodarsan, President & Dire 21 Susan Lane Dix Hills, NY 11746	ctor Name and Title Address: Name and Title	24 Olivia Road Hightstown, NJ 08520	
EV INITE Name and Title Address Name and Title Address	AL OFFICERS AND/OR DIRECTORS Navin M. Seodarsan, President & Dire 21 Susan Lane Dix Hills, NY 11746	ctor Name and Title Address: Name and Title Address: Address:	24 Olivia Road Hightstown, NJ 08520	

Name and	Fitle:	Name and Title:	
Address	<u></u>	Address:	
	<u>CGISTERED AGENT</u> ida street address (P.O. Box NOT acceptable) c	d'the maistared count is:	
	NRAI Services, Inc.	in the registered agent is.	
Address:	1200 South Pine Island Road Plantation,	_	18 SI
-	Florida 33324	_	700 70
ARTICLE VII IN	<u>CORPORATOR</u>		FILEUM 4: 24 SEGUE TATASSEE, FL
The name and addi	ress of the Incorporator is:		SE SE
Name:	Navin M. Seodarsan	_	THE TOTAL THE TANK
Address:	21 Susan Lanc	_	
	Dix Hills, NY 11746	_	
Effective date, if other	FFECTIVE DATE: ner than the date of filing: e is listed, the date must be specific and cannot	(OPTIONAL) ot be more than five days price	or or 90 days after the
	serted in this block does not meet the applicable ctive date on the Department of State's records.		this date will not be listed as
certificate, I am fam	as registered agent to accept service of process j iliar with and accept the appointment as registe		
By:	I Services, Inc.	1 Sec.	4/27/22
	Required Signature/Registered Agent		Date
	nent and affirm that the facts stated herein are partment of State constitutes a third degree felon		
Nou			04/27/22
Required Signature/	Incorporator	Date	