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(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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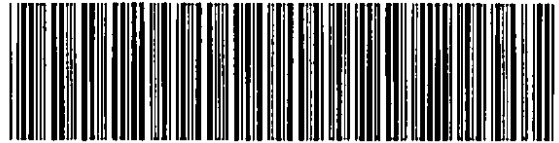
(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. O'KEEFE

MAY 23 2022

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COVER LETTER

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

SUBJECT: Direct Provisions Florida L.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 ☒ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: Kelsey Shofner

Name (Printed or typed)

9706 Parkford Dr

Address

Dallas, TX 75238

City, State & Zip

214-506-6768

Daytime Telephone number

kelsey@shofnerpllc.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
OF
JIREH PROVISIONS FLORIDA I, P.A.**

In compliance with the requirements of the Florida Business Corporation Act (the "FBCA") and the Professional Service Corporation and Limited Liability Company Act, the undersigned hereby acts as an incorporator in adopting and filing these Articles of Incorporation.

ARTICLE I: NAME

The name of the corporation shall be Jireh Provisions Florida I, P.A. (the "**Corporation**").

ARTICLE II: INITIAL PRINCIPAL OFFICE

The street address of the initial principal office of the Corporation is 11011 Sheridan Street Suite 214, Hollywood, FL 33026.

The mailing address of the Corporation is 8708 S Congress Ave Suite 570, Austin, TX 78745.

ARTICLE III: PURPOSE

The Corporation is organized to provide Chiropractic services.

ARTICLE IV: SHARES

The total number of shares that the Corporation is authorized to issue and have outstanding at any time is 1,000.

ARTICLE V: PREEMPTIVE RIGHTS

The Corporation elects to have preemptive rights for shareholders pursuant to the provisions of Section 607.0630(2) of the FBCA.

ARTICLE VI: INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office of the Corporation is 7421 SE 66th Street, Miami, FL 33143. The name of the initial registered agent of the Corporation at that office is Peter Martinez.

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TALLAHASSEE, FLORIDA

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE VII: INCORPORATOR


The name and street address of the Corporation's incorporator is:

Peter Martinez
7421 SE 66th Street
Miami, FL 33143

ARTICLE VIII: INDEMNIFICATION OF DIRECTORS AND OFFICERS

The Corporation shall indemnify, advance expenses, and hold harmless, to the fullest extent permitted by the FBCA and other applicable law as it presently exists or may hereafter be amended, any person (a "**Covered Person**") who was or is made or is threatened to be made a party or is otherwise involved in any action, suit, or proceeding, whether civil, criminal, administrative, or investigative, and whether formal or informal (a "**Proceeding**"), by reason of the fact that they, or a person for whom they are the legal representative, is or was a director or officer of the Corporation or, while a director or officer of the Corporation, is or was serving at the request of the Corporation as a director, officer, employee, or agent of another corporation or of a partnership, joint venture, trust, enterprise, or nonprofit entity, including service with respect to employee benefit plans, against all liability, damages, and loss suffered and expenses (including attorneys' fees) actually and reasonably incurred by such Covered Person. Any amendment, repeal, or modification of this Article VIII shall not adversely affect any right or protection hereunder of any person in respect of any act or omission occurring prior to the time of such repeal or modification.

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



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Required Signature/Registered Agent

4/21/2022

Date

I submit these Articles of Incorporation and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Florida Department of State constitutes a third degree felony as provided for in Section 817.155 of the Florida Statutes.


ID: XFSJL0HCZLNK4F45daSyPR3

Required Signature/Incorporator

4/21/2022

Date

eSignature Details

Signer ID:	XFSJLdHcztzuk4F45daSyfR3
Signed by:	Dr. Peter Martinez
Sent to email:	drpetermartinez@gmail.com
IP Address:	107.77.218.64
Signed at:	Apr 21 2022, 10:14 am CDT