# **Electronic Articles of Incorporation For**

P24000073373 FILED December 04, 2024 Sec. Of State snchatham

WESTSIDE CHIROPRACTIC CENTER 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:

WESTSIDE CHIROPRACTIC CENTER INC

## **Article II**

The principal place of business address:

25 SE 2ND AVENUE 810 MIAMI, FL. 33131

The mailing address of the corporation is:

25 SE 2ND AVENUE 810 MIAMI, FL. 33131

# **Article III**

The purpose for which this corporation is organized is: CHIROPRACTIC OFFICE HEALTH CLINIC

#### **Article IV**

The number of shares the corporation is authorized to issue is: 100

## Article V

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

LISA I OWEN 25 SE 2ND AVENUE 810 MIAMI, FL. 33131

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

Registered Agent Signature: LISA OWEN

## **Article VI**

The name and address of the incorporator is:

LISA OWEN 10175 NW 31ST COURT

SUNRISE, FL 33351

Electronic Signature of Incorporator: LISA OWEN

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: DR LISA I OWEN 10175 NW 31ST COURT SUNRISE, FL. 33351

## **Article VIII**

The effective date for this corporation shall be:

12/04/2024

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