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TRANSMITTAL LETTER

FILED
95 MAY -6 AM 9:43
TALLAHASSEE, FLORIDA

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

200001810032
-05/07/96--01048--020
***122.50 ***122.50

SUBJECT: The Plan Doctor, Inc.
(Proposed corporate name - must include suffix)

Enclosed is an original and one (1) copy of the articles of Incorporation and a check
for:

☐ \$70.00
Filing Fee

☐ \$78.75
Filing Fee
& Certificate

☒ \$122.50
Filing Fee
& Certified Copy

☐ \$131.25
Filing Fee,
Certified Copy
& Certificate

FROM:

Lane E. Trawick

Name (printed or typed)

1701 Doyle Road., Suite C

Address

Tallahassee, FL 32325

City, State & Zip

407-574-2134

Daytime Telephone number

NOTE: Please provide the original and one copy of the articles.

D. BROWN MAY 13 1995

ARTICLES OF INCORPORATION

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STATE
OF FLORIDA

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

The Plan Doctor, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

1701 Doyle Road., Suite C
Deltona, FL 32725

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

200 Shares

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Lane E. Trawick
1701 Doyle Road., Suite C
Deltona, FL 32725

ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

Lane E. Trawick
1701 Doyle Rd., Suite C
Deltona, FL 32725

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

3 day of May, 19 96.



Signature

Signature

Signature

Articles of Incorporation
Filing Fee - \$35

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 or 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: The Plan Doctor, Inc.

2. The name and address of the registered agent and office is:

Lane E. Trawick

(Name)

1701 Doyle Rd., Suite C

(P.O. Box not acceptable)

Deltona, FL 32725

(City/State/Zip)

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 hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.


(Signature)