

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

798000105092

FILED
DEC 17 AM 10:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SUBJECT: The House Doctors of Palm Beach, Inc.
(Proposed corporate name - must include suffix)

500002715035--3
-12/17/98--01109--010
*****87.50 *****87.50

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 of Status

☐ \$78.75
Filing Fee
& Certified Copy

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

ADDITIONAL COPY REQUIRED

FROM: ALBERT DENIS MENARD
Name (Printed or typed)

102 So. 7th St. Apt.
Address

Lake Worth Fl. 33460
City, State & Zip

1-561-533-0716
Daytime Telephone number

F. CHESSEB DEC 18 1998

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

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

THE HOUSE DOCTORS OF PALM BEACH, INC.

ARTICLE II PRINCIPAL OFFICE

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

102 SO. F ST., LAKE WORTH, FL 33460
P.O. BOX 1021, LAKE WORTH, FL 33460

ARTICLE III SHARES

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

500

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

ALBERT DENIS MENARD
3839 HENYON RD, LAKE WORTH, FL 33461

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

ALBERT DENIS MENARD
3839 HENYON RD. LAKE WORTH. FL. 33461

Albert D. Menard

Signature/Incorporator

12-14-98

Date

(An additional article must be added if an effective date is requested.)

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

ALBERT DENIS MENARD

Signature/Registered Agent

12-14-98

Date

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