

TRANSMITTAL LETTER

PO2000094532

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

700007422657--5
-08/29/02--01034--019
*****78.75 *****78.75

SUBJECT: Washington D. Baquero, MD, PA
(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 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: Washington D. Baquero, MD
Name (Printed or typed)

1705 Colonial Blvd.
Address

Fort Myers, FL 33907
City, State & Zip

(239) 275-4141
Daytime Telephone number

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

02 AUG 29 PM 2:36

FILED

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

bm 8/30

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

Washington D. Baquero, MD, PA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/ mailing address is:

1705 Colonial Blvd.
Fort Myers, FL 33907

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To provide Physician Medical Services to the community.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

Washington D. Baquero, MD
1705 Colonial Blvd.
Fort Myers, FL 33907

Title:
President/CEO

ARTICLE VI REGISTERED AGENT

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

Washington D. Baquero, MD
1705 Colonial Blvd.
Fort Myers, FL 33907

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Innovative Business Decisions, Inc.
3049 Cleveland Avenue, Suite 101
Fort Myers, FL 33901

02 AUG 29 PM 2:37
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

W. Baquero, MD
Signature/Registered Agent

8/13/02
Date

North John
Signature/Incorporator

8/13/02
Date