Jun 17 03 02:59p

**EXPRESS** 

305-444-4977

p. 1

Division of Corporations

Page 1 of 2 00006

## Florida Department of State

Division of Corporations Public Access System

**Electronic Filing Cover Sheet** 

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H03000215712 8)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

Division of Corporations

Fax Number

: (850)205-0381

From:

Account Name : EXPRESS CORPORATE FILING SERVICE INC.

Account Number : 12000000146

Phone

: (305)444-4994

Fax Number

: (305)444-4977

# FLORIDA PROFIT CORPORATION OR P.A.

DENISE ERDEM, P.D., P.A.

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$78.75





((CH03000215712)))

### ARTICLES OF INCORPORATION

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

**EXPRESS** 

#### NAME

The name of the corporation shall be: DENISE ERDEM, M.D., PA.

#### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 4875 PONCE DE LEON BLVD, SUITE#200., CORAL GABLES, FL 33146

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is: **PHYSICIAN** 

#### ARTICLE IV SHARES

The number of shares of stock is: 500 TO \$1.00 EACH

#### ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s): DENISE ERDEM, AS PRESIDENT WITH ADDRESS AT: 4875 PONCE DE LEON BLVD. SUITE #200., CORAL GABLES, FL 33148

#### ARTICLE VI REGISTERED AGENT

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

DENISE ERDEM WITH ADDRESS AT: 4675 PONCE DE LEON BLVD. SUITE#200., CORAL GABLES, FL 33146

#### ARTICLE VII INCORPORATOR

The name and address of the incorporator is:

DENISE ERDEM WITH ADDRESS AT: 4675 PONCE DE LEON BLVD., SUITE#200., CORAL GABLES, FL 33146

<del>本水水水香香灌水水水水</del> 州州南南海州南南沙州西州南州南州南州南北北南省南南南南南南南南南南南南南南南南南南南南南南南南南南	
Having been named as registered agent to accept service of po- certificate, Lam familiar light and accept the appointment as re-	rocess for the above stated corporation at the place designated in this gistered agent and agree to act in this capacity
× Voorto	6 17 03
Signature/Registered Agent	Date
Signature/Incomprorator	() 17\03