

Division of Corporations

**P04000068190**

Florida Department of State  
Division of Corporations  
Public Access System

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To:

Division of Corporations  
Fax Number : (850) 205-0381

From:

Account Name : EMPIRE CORPORATE KIT COMPANY  
Account Number : 072450003255  
Phone : (305) 634-3694  
Fax Number : (305) 633-9696

FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
04 APR 26 AM 8:23

**FLORIDA PROFIT CORPORATION OR P.A.**

**mark s. eskenazi m.d., p.a.**

|                       |         |
|-----------------------|---------|
| Certificate of Status | 0       |
| Certified Copy        | 1       |
| Page Count            | 02      |
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**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:

MARK S. ESKENAZI M.D., P.A.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

9538 NEW WATERFORD COVE  
DELRAY BEACH FL 33446

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

MEDICAL - PHYSICIAN

**ARTICLE IV SHARES**

The number of shares of stock is:

1000

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

List name(s), address(es) and specific title(s):

MARK S ESKENAZI PRESIDENT

**ARTICLE VI REGISTERED AGENT**

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

MARK S ESKENAZI  
9538 NEW WATERFORD COVE  
DELRAY BEACH FL 33446

**ARTICLE VII INCORPORATOR**

The name and address of the incorporator is:

MARK S. ESKENAZI  
9538 NEW WATERFORD COVE  
DELRAY BEACH FL 33446

\*\*\*\*\*  
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

Mark S. Eskenazi  
Signature/Registered Agent

4/26/04  
Date

Mark S. Eskenazi  
Signature/Incorporator

4/26/04  
Date

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