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SECRETARY OF STATE
DIVISION OF CORPORATIONS
12 FEB 15 AM 10:15

W12-7018

PS 2/16/12

Date: 2/13/2012

Beauty Mark Plastic Surgery, P.A.
100 NW 82nd Avenue
Plantation, FL 33324
Phone: 954-593-2965
EIN: 45-3937726

To whom it may concern,

This is to notify the Florida Department of State, Division of Corporation to forgo the previously requested conversion of Beauty Mark Plastic Surgery, LLC to Beauty Mark Plastic Surgery, P.A. since it is not possible. Instead I would like to form The Beauty Mark Plastic Surgery, P.A. The Supporting documents are attached and the funds that were previously sent can be used for filing the Professional Association.

Thank You

A. Kedhidhian. D.O

Alberik Kedhidhian, D.O.
Plastic and Reconstructive Surgeon

COVER LETTER

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

SUBJECT: Beauty Mark Plastic Surgery, P.A.
(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

Please Note
EIN #: 45-3937726

FROM: Alberik Keshishian
Name (Printed or typed)

100 NW 82nd Ave, Suite 405
Address

Plantation, FL 33324
City, State & Zip

954-593-2965
Daytime Telephone number

Alberikk@netzero.com
E-mail address: (to be used for future annual report notification)

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

ARTICLES OF INCORPORATION

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

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DIVISION OF CORPORATIONS

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ARTICLE I NAME

The name of the corporation shall be: BEAUTY MARK PLASTIC SURGERY, P.A.

ARTICLE II PRINCIPAL OFFICE

Principal **street** address:
100 N.W. 82nd Avenue
Suite 405
Plantation, FL 33324

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
To provide plastic and reconstructive surgical services.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Alberik Keshishian
Address: 100 N.W. 82nd Avenue, Suite 405, Plantation, FL 33324

Name and Title:
Address:

Name and Title:
Address:

Name and Title:
Address:

Name and Title:
Address:

ARTICLE VI REGISTERED AGENT

The **name and Florida street address** (P.O. Box **NOT** acceptable) of the registered agent is:

Name: Alberik Keshishian
Address: 100 N.W. 82nd Avenue, Suite 405, Plantation, FL 33324

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: Alberik Keshishian
Address: 100 N.W. 82nd Avenue, Suite 405, Plantation, FL 33324

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

A. Keshishian
Required Signature/Registered Agent

Feb 06, 2012
Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

A. Keshishian
Required Signature/Incorporator

Feb 06, 2012
Date