

P96000008080

TRANSMITTAL LETTER

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

RECEIVED  
JAN 22 1997  
TALLAHASSEE, FL 32314

SUBJECT: DAVID O. KATEB, M.D., P.A.  
(Proposed corporate name - must include suffix)

200001694852  
-01/22/96--01066---009  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

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

☐ \$122.50  
Filing Fee  
& Certified Copy

☐ \$131.25  
Filing Fee,  
Certified Copy  
& Certificate

Additional Copy Required

FROM: DAVID KATEB  
Name (printed or typed)

8443 SAWPINE ROAD  
Address

DELRAY BEACH, FL 33446  
City, State & Zip

(407) 637-8080  
Daytime Telephone number

David GAVE  
AUTHORIZATION BY PHONE TO  
CORRECT Art V, VI, VII  
DATE 1/25  
LOC. EXAM ST

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

ARTICLES OF INCORPORATION

*The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.*

ARTICLE I NAME

The name of the corporation shall be:

DAVID O. KATEB, M.D., P.A.

ARTICLE II PRINCIPAL OFFICE

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

5050 WEST ATLANTIC AVE  
DELRAY BEACH, FL 33445

ARTICLE III SHARES

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

1000

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

DAVID O. KATEB, M.D.  
5050 W. ATLANTIC AVE.  
DELRAY BEACH, FL 33445

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

INITIAL OFFICER: DAVID O. KATES, MD. - PRESIDENT  
5050 W. ATLANTIC AVE.

ARTICLE VI DEERAY BEACH, FL, 33445.

PURPOSE: PERSONAL SERVICE CORP. - MEDICAL PRACTICE

ARTICLE VII (FOR THE PRACTICE OF MEDICINE)

EFFECTIVE DATE: JAN, 15, 1996.

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

15 day of JANUARY, 19 96.

[Signature] - President  
Signature

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE  
UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF  
FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED  
OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is:

DAVID O. KATER, MD, PA

2. The name and address of the registered agent and office is:

DAVID O. KATER MD  
(NAME)

8443 SAWPINE ROAD  
(P.O. Box or Mail Drop Box **NOT** ACCEPTABLE)

DEER BEACH FL 33446  
(CITY/STATE/ZIP)

95 JUN 22 11 52 AM  
STATE  
OF FLORIDA  
TALLAHASSEE

*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.*

[Signature]  
(SIGNATURE)

1/1/96  
(DATE)