Division of Corporations

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Florida Department of State

Division of Corporations Public Access System Katherine Harris, Secretary of State

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To:

Division of Corporations

Fax Number : (850)922-4001

From:

Account Name : FLORIDA INCORPORATORS, INC.

Account Number: 075350000473 Phone : (305)661-8503 Fax Number : (305)661-8621

FLORIDA PROFIT CORPORATION OR P.A.

Apollo Medical Center, P.A.

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Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

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Articles Of Incorporation

Of

Apollo Medical Center, P.A.

THE UNDERSIGNED, ACTING AS INCORPORATOR OF A CORPORATION UNDER THE FLORIDA BUSINESS CORPORATION ACT, ADOPTS THE FOLLOWING ARTICLES OF INCORPORATION:

FIRST: The name of the corporation is Apollo Medical Center, P.A.

SECOND: The period of its duration is perpetual.

THIRD: The date and time of the commencement of the corporate existence shall be the date of the filing of these Articles by the Department of State.

FOURTH: The purpose or purposes for which the corporation is organized is to engage in the practice of medicine under the provisions of Chapter 621, Florida Statutes.

FLORIDA INCORPORATORS, INC. 1221 BRICKELL AVE, STE. 900 MIAMI, FL 33131 (305) 661-8503 99 FEB -9 PH & 44
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FIFTH: The aggregate number of shares which the corporation shall have authority to issue is ONE THOUSAND (1,000) SHARES of capital stock, \$.001 par value each.

SIXTH: The number of directors constituting the initial Board of Directors of the corporation is ONE (1) and the name and address of the person who is to serve as director until the first annual meeting of shareholders or until his successor is elected and qualified is:

Jay Chowdappa, M.D. 7134 S.R. 54 New Port Richey, FL 34653

SEVENTH: The name and address of the incorporator is:

Mark Hankins 501 Caligula Avenue Coral Gables, Fl 33146

EIGHTH: The name and address of the initial registered agent and the initial registered office is:

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Florida Incorporators, Inc. 1221 Brickell Avenue, Suite 900 Miami, Fl 33131

NINTH: The mailing address and principal office of the corporation is:

Apollo Medical Center, P.A. 7134 S.R. 54
New Port Richey, FL 34653

DATED: February 9, 1999

MARK HANKINS Incorporator

ACCEPTANCE OF REGISTERED AGENT

I hereby am familiar with and accept the duties and responsibilities as registered agent of the corporation.

FLORIDA INCORPORATORS, INC.

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MARK HANKINS, President

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SECRETARY OF STATE