

No 2000000 SP5C



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CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

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NEW FILINGS

- ☐ Profit
☐ Not for Profit
☐ Limited Liability
☐ Domestication
☐ Other

AMENDMENTS

- ☐ Amendment
☐ Resignation of R.A., Officer/Director
☐ Change of Registered Agent
☐ Dissolution/Withdrawal
☐ Merger

OTHER FILINGS

- ☐ Annual Report
☐ Fictitious Name

REGISTRATION/QUALIFICATION

- ☐ Foreign
☐ Limited Partnership
☐ Reinstatement
☐ Trademark
☐ Other

Examiner's Initials

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Articles of Incorporation
(In Compliance with Chapter 617, F.S., (Not for Profit))

Article I Name: The name of the corporation shall be: University of Florida Hand Fellows Alumni Association, Inc.

Article II Principal Office: The principal place of business and mailing address of this corporation shall be:

University of Florida Hand Fellows Alumni Association, Inc
Hand Surgery Office
200 SW 62nd Blvd. Suite B
Gainesville, Florida 32607

FILED
02 AUG - 1 AM 10:38
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Article III Purpose: The purpose for which the corporation is organized is:

Said association is organized exclusively for charitable, and educational purposes, including, for such purposes, the making of distributions to organizations under section 501(c) (3) of the Internal Revenue Code, or the corresponding section of any future federal tax code. The specific purposes of the business are as follows: (1) to provide an annual educational exchange between physicians and therapists (2) to provide participates with the opportunity to learn and train from a prominent hand surgeon(s). (3) to enhance and build the upper extremity knowledge base of the University of Florida physicians and therapists.

Article IV Manner of Election: The manner in which the directors are elected or appointed. The directors are appointed by the members.

Article V Initial Directors/Officers:

Paul C. Dell-President
Hand and Microsurgery Orthopedics
200 SW 62nd Blvd Suite B
Gainesville, Florida 32607

Larry Chidgey--Secretary
Hand and Microsurgery Orthopedics
200 SW 62nd Blvd Suite B
Gainesville, Florida 32607

Thomas W. Wright--Treasurer
Hand, Shoulder, and Microsurgery
200 SW 62nd Blvd. Suite B
Gainesville, Florida 32607

Article VI Initial Registered Agent and Street Address: The name and Florida street address of the registered agent is:

Mike Cricchio
Clinic Coordinator
Hampton Oaks Hand
200 SW 62nd Blvd Suite B
Gainesville, Florida 32607

Article VII Incorporator: The name and address of the Incorporation is:

Mike Cricchio
Clinic Coordinator
Hampton Oaks Hand
200 SW 62nd Blvd Suite B
Gainesville, Florida 32607

Having 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.

Mike Cricchio
Signature/Registered Agent

7/29/02
Date

Mike Cricchio
Signature/Incorporator

7/29/02
Date