# N0400003349

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Tallahassee FL 32303
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# CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

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1.	East Bay Medical Cer	nter, Inc.				
2.	(Corporation Name		(Document #)		DUL APR -2	
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<ul> <li>Profit</li> <li>Not for Profit</li> <li>Limited Liability</li> <li>Domestication</li> <li>Other</li> </ul>			<ul> <li>Amendment</li> <li>Resignation of R.A., Officer/Director</li> <li>Change of Registered Agent</li> <li>Dissolution/Withdrawal</li> <li>Merger</li> </ul>			
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	Annual Report Fictitious Name		Foreign Limited Partnersh Reinstatement Trademark Other	iip 		

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Examiner's Initials

# ARTICLES OF INCORPORATION

of

# EAST BAY MEDICAL CENTER, INC.

(A Florida Not for Profit Corporation, organized under Chapter 617, Florida Statutes)

KNOW ALL MEN BY THESE PRESENTS: That the undersigned, for the purpose of organizing a corporation under and pursuant to the provisions of the Constitution and the laws of the State of Florida, and in compliance with Chapter 617, <u>Florida Statutes</u>, hereby agrees to unite and associate as a corporation not for profit, and hereby makes, executes and adopts the following Articles of Incorporation.

# ARTICLE I

Name

The name of this corporation is: EAST BAY MEDICAL CENTER, INC.

# ARTICLE II

#### **Principal Office**

The principal place of business and mailing address of this corporation, are

535 John Knox Road, Tallahassee, FL 32303

ARTICLE III

Purpose

The purpose for which this corporation is organized is to provide medical services.

# ARTICLE IV

#### Manner of Election

The method of election of directors shall be as stated in the Bylaws.

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# ARTICLE V

# **Registered Office and Registered Agent**

The street address of the corporation's initial registered office and the name of its initial registered agent at that address are:

Joel Montgomery 535 John Knox Road Tallahassee, FL 32303

# **ARTICLE VI**

Incorporator

The incorporator for these Articles of Incorporation is:

Joel Montgomery 535 John Knox Road Tallahassee, FL 32303

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.

**Registered Agent** Joel Montgomery. oel Montgomery, Incorporator

<-?(-0 Date: Date:

