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FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
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REGISTRATION SERVICES

**FLORIDA PROFIT/NON PROFIT CORPORATION**  
**Informed Independent Physician Association, Inc.**

Certificate of Status	0
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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MAY 25 2018

K. Brumbley

**ARTICLES OF INCORPORATION  
OF  
INFORMED INDEPENDENT PHYSICIAN ASSOCIATION, INC.**

**A Florida Not For Profit Corporation**

The undersigned, acting as incorporator of this Corporation pursuant to Chapter 705, Florida Statutes, adopts the following articles of incorporation as follows:

**I.  
NAME**

The name of this Corporation is "Informed Independent Physician Association, Inc."

**II.  
PRINCIPAL OFFICE**

The principal place of business and mailing address of the Corporation is 1649 Atlantic Boulevard, Suite 100, Jacksonville, Florida 32207.

**III.  
COMMENCEMENT OF EXISTENCE AND DURATION**

The existence of the Corporation commences upon the filing of these Articles of Incorporation. The period of the duration of this Corporation is perpetual unless dissolved according to law.

**IV.  
PURPOSE**

The corporation is organized and shall operate exclusively as a statewide organization of physicians for the purposes of providing accredited continuing medical education and promoting the professional growth of physicians licensed or seeking licensure by the State of Florida. The corporation shall :

- (a) Encourage its membership to render quality service to the health professions and to the public;
- (b) Develop, sponsor and promote continuing medical education or medical related educational activities to physicians.
- (c) Develop, sponsor and promote continuing medical education or medical related educational activities to other health care professions that are or may become part of the interdisciplinary team working with physicians.
- (d) Develop, sponsor and promote the use of consumer medical education by physicians and other health care professions that are or may become part of the interdisciplinary team working with physicians.
- (e) Provide educational activities designated for the American Medical Association Physician's Recognition Award Category 1 Credit.

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**V.**  
**MEMBERS**

The members of this Corporation shall be as provided in the Bylaws. There may be separate classes of membership prescribed in the Bylaws.

**VI.**  
**INITIAL REGISTERED OFFICE AND AGENT**

The street address and city of the registered office of the Corporation is 1649 Atlantic Boulevard, Suite 100, Jacksonville, Florida 32207. The name of the registered agent at such address is Joseph J. McGurrin.

**VII.**  
**BOARD OF DIRECTORS AND OFFICERS**

The number of persons constituting the Board of Directors of this Corporation shall be not less than three nor more than fifteen as provided in the bylaws. Initial Directors shall be appointed by the incorporator. Thereafter, the members of the Corporation will select Directors.

**VIII.**  
**INDEMNIFICATION OF OFFICERS AND DIRECTORS**

All officers and directors of this Corporation shall be indemnified by the Corporation as provided in the Bylaws against all expenses and liabilities, including attorney's fees (including appellate proceedings) reasonably incurred in connection with any proceeding or settlement thereof in which they may become involved by reason of holding such office. The Corporation may purchase and maintain insurance on behalf of all officers and directors against any liability asserted against them or incurred by them in their capacity as officers and directors or arising out of their status as such.

**IX.**  
**NON-STOCK BASIS**

This Corporation is organized on a non-stock basis.

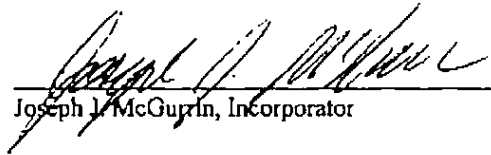
**X.**  
**INCORPORATOR**

The name and address of the incorporator of this Corporation are as follows:

Joseph J. McGurrin  
1649 Atlantic Boulevard, Suite 100  
Jacksonville, Florida 32207

[signature page follows]

IN WITNESS WHEREOF, the undersigned incorporator has hereunto set his hand and affixed his seal this 24<sup>th</sup> day of May, 2018.

  
\_\_\_\_\_  
Joseph J. McGurin, Incorporator

**CERTIFICATE OF ACCEPTANCE AND DESIGNATION OF  
REGISTERED AGENT OF  
INFORMED INDEPENDENT PHYSICIAN ASSOCIATION, INC.**

Pursuant to the Florida Not for Profit Corporations Act, the undersigned, having been designated as the initial Registered Agent for the service of process within the State of Florida upon Informed Independent Physician Association, Inc., a not for profit corporation organized under the laws of the State of Florida, and having been made aware of the obligations and responsibilities of a Registered Agent, does hereby accept the appointment as such Registered Agent for the above named corporation, and does hereby agree to comply with the provisions of the Florida Statutes relative to keeping open the Registered Office of said corporation, which Registered Office is located at 1649 Atlantic Boulevard, Suite 100, Jacksonville, Florida 32207.

IN WITNESS WHEREOF, the undersigned, as the designated Registered Agent, has hereunto set his hand and seal in Jacksonville, Duval County, Florida, on this 24<sup>th</sup> day of May, 2018.

  
\_\_\_\_\_  
Joseph J. McGurrin, Registered Agent