Transmittal Letter

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

TAMPA BAY ANESTHESIA INC SUBJECT:

(Proposed corporate name - must include suffix)

Enclosed is an original and one (1) copy of the articles of incorporation and a check for:

. \$A\$70.00

() \$78.75

() \$122.50

() \$131.25

FROM:

SHAUKAT CHOWDHARI -

Name (printed or typed)

1422 DISTANT OAKS DR

Address

WESLEY CHAPEL.

City, State, & Zip

(813) 991-9439

Daytime Telephone Number

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

Articles of Incorporation

Of

TAMPA BAY ANESTHESIA INC

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:

TAMPA BAY ANESTHESIA INC

ARTICLE II PRINCIPAL OFFICE

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

1422 DISTANT OAKS DR, WESLEY CHAPEL, FL-33543

ARTICLE III SHARES

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

100 Shares

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is

SHAUKAT CHOWDHARI 1422 DISTANT OAKS DR WESLEY CHAPEL,FL-33543

ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is (are): SHAUKAT CHOWDHARI 1422 DISTANT OAKS DR, WESLEY CHAPEL, FL-33543

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

ANTONINA CHOWDHARI

Signature

Signature

Signature

Articles of Incorporation Filing Fee - \$35

CERTIFICATE OF DESIGNATION OF

REGISTERED AGENT / REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 OR 617.0501, 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: TAMPA BAY ANESTHESIA INC
- 2. The name and address of the registered agent and office is:

SHAUKAT CHOWDHARI 1422 DISTANT OAKS DR WESLEY CHAPEL,FL-33543



Having been named as the 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