TRANSMIPAL ETTE 000059796

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

Subject

Dr. Fab. PA.

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

\$78.75
Filing Fee
& Certified Copy

\$122.50
Filing Fee
& Certified Copy

\$131.25
Filing Fee,
Certified Copy
& Certificate

(ADDT'L COPY REQ'D)

(ADDT'L COPY REQ'D)

FROM:	Fabiola Jackson	<u> </u>
	2836 Shenandoah Road	<u>, </u>
	Deland, Florida 32720	
	No.	

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NOTE: Please provide the original and one copy of the articles. Provide TWO copies if you have requested a certified copy as designated in the boxes above.



Secretary of State

June 9, 2000

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FABIOLA JACKSON 2836 SHENANDOAH RD. DELAND, FL 32720

SUBJECT: DR. FAB PA.

Ref. Number: W00000014681

We have received your document for DR. FAB PA. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with an address and telephone number where you can be reached during working hours.

The document must state the number of shares of authorized stock.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6930.

Carolyn Gurr Document Specialist

Letter Number: 100A00033104

ARTICLES OF INCORPORATION OF Dr. Fab PA.

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following articles of incorporation.

ARTICLE I

The name of the Corporation shall be: Dr. Fab. PA.

ARTICLE II *PRINCIPAL OFFICE*

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

601 N. Clyde Morris Blvd. Daytona Beach, Florida 32114

ARTICLE III

The number of shares that this corporation is authorized to have outstanding at any one time is: # shares at wedollar 0 par value per share. (F

INI<u>TIA</u>L REGISTERED AGENT AND STREET ADDR

The name and Florida street address of the initial registered agent is:

Fabiola Jackson 2836 Shenandoah Road Deland, Florida 32720

SPECIFIC TYPE OF BUSINESS

The specfic purpose for which the corporation is being formed: physician's office

INCORPORATO<u>R</u>

The name and address of the incorporator to these Articles of Incorporation is:

Fabiola Jackson 2836 Shenandoah Road Deland, Florida 32720

Having been named as 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 ham familiar with and accept the obligations of my position as registered agent.

giola Jackson, Registered Agent