

P00000063496

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

SUBJECT: LUIS M. AZAN, MD, PA
(Proposed corporate name - must include suffix)

700003295617--2
-06/19/00--01107--006
*****78.75 *****78.75

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

\$70.00
Filing Fee

\$78.75
Filing Fee
& Certificate of Status

\$78.75
Filing Fee
& Certified Copy

\$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: LUIS M. AZAN
Name (Printed or typed)

8405 N EDISON AVE
Address

TAMPA, FL 33604
City, State & Zip

(813) 932-2911
Daytime Telephone number

00 JUN 29 PM 2:39
FILED
SECRETARY OF STATE
TALLAHASSEE FLORIDA

T. SMITH JUN 29 2000

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

57691-12



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

June 22, 2000

LUIS M AZAN
8405 N EDISON AVE
TAMPA, FL 33604

SUBJECT: LUIS M. AZAN, MD, PA
Ref. Number: W00000015945

We have received your document for LUIS M. AZAN, MD, 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):

The specific nature of business of the professional association must be stated in the document.

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) 487-6927.

Tracy Smith
Document Specialist

Letter Number: 300A00035476

ARTICLES OF INCORPORATION

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 NAME AND NATURE OF BUSINESS

The name of the corporation shall be:

LUIS M. AZAN, MD, PA

NATURE OF BUSINESS OF THE PROFESSIONAL ASSOCIATION IS TO

ARTICLE II PRINCIPAL OFFICE

PRACTICE MEDICINE (MEDICAL DOCTOR)

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

8405 N EDISON AVE TAMPA, FL 33604 (BUSINESS)

PO BOX 261541 TAMPA, FL 33685 (MAILING)

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 Florida street address of the initial registered agent are:

ROBERTO GARCIA, CPA

8405 N EDISON AVE, TAMPA, FL 33604

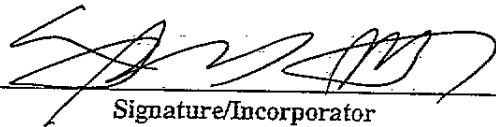
ARTICLE V INCORPORATOR

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

LUIS M. AZAN

P.O. BOX 261541 TAMPA, FL 33685

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
00 JUN 29 PM 2:39



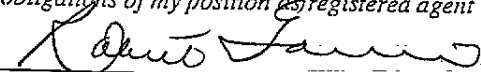
Signature/Incorporator

6/13/01

Date

(An additional article must be added if an effective date is requested.)

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 I am familiar with and accept the obligations of my position as registered agent



Signature/Registered Agent

6/9/00

Date