

# P00000095224

Williams, Gautier, Gwynn & DeLoach, P.A.

Requestor's Name

2010 Delta Blvd., Tallahassee, FL

Address

850-386-3300

City/State/Zip

Phone #

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. Eric Nicholson, M.D., P.A.  
(Corporation Name) (Document #)

2. \_\_\_\_\_  
(Corporation Name) (Document #)

3. \_\_\_\_\_  
(Corporation Name) (Document #)

4. \_\_\_\_\_  
(Corporation Name) (Document #)

FILED  
00 OCT -9 AM 8:47  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

RECEIVED  
00 OCT -9 PM 4:10  
DIVISION OF CORPORATION

☐ Walk in

☐ Pick up time \_\_\_\_\_

☐ Certified Copy

☐ Mail out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

NEW FILINGS	
<input checked="" type="checkbox"/>	Profit <del>Corp</del>
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other <del>P.A.</del>

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

000003419840--8  
-10/10/00--01003--001  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

T. SMITH OCT 09 2000

Examiner's Initials

ARTICLES OF INCORPORATION  
OF  
ERIC NICHOLSON, M.D., P.A.

The undersigned, who is duly licensed to practice medicine in the State of Florida, desiring to form a professional corporation in accordance with the Florida Professional Service Corporation and Limited Liability Company Act, adopts the following Articles of Incorporation

I. NAME

The name of the professional Corporation is Eric Nicholson, M.D., P.A.

II. PURPOSE

The purpose for which the Corporation is organized is to practice the profession of medicine. In addition, the Corporation may invest the funds of the Corporation in real estate, mortgages, stocks, bonds or any other type of investment, own real and personal property necessary for the rendering of professional services and engage in all lawful activities authorized under the Florida Professional Service Corporation and Limited Liability Company Act.

III. ELECTION UNDER PROFESSIONAL CORPORATION ACT

The Corporation elects to be governed by the provisions of the Florida Professional Service Corporation and Limited Liability Company Act.

IV. DURATION

The term of existence of the Corporation is perpetual.

V. CAPITAL STOCK

The number of shares the Corporation is authorized to issue is 5,000, all of which shall be common shares with par value of \$1.00.

VI. STATED CAPITAL

The amount of capital with which the Corporation shall begin business is \$1,000.00.

VII. REGISTERED OFFICE

The street address of the Corporation's initial registered office in this State is 1843 Fiddler Court, Tallahassee, Florida 32308. The initial registered agent at the registered office is Eric Nicholson.

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### VIII. PRINCIPAL OFFICE

The street address and the mailing address of the initial principal office of the Corporation is 1843 Fiddler Court, Tallahassee, Florida 32308.

### IX. INCORPORATORS

The name and address of the incorporator are as follows:

Name	Address
Eric Nicholson	1843 Fiddler Court Tallahassee, Florida 32308

### X. DIRECTORS

The initial Board of Directors shall consist of one (1) member. The name and address of the Board of Directors are as follows:

Name	Address
Eric Nicholson	1843 Fiddler Court Tallahassee, Florida 32308

IN WITNESS WHEREOF, the undersigned incorporator has executed these Articles of Incorporation on this 6<sup>TH</sup> day of October, 2000.

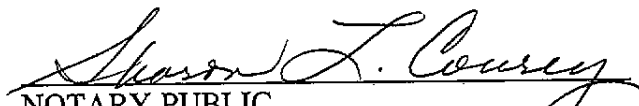


Eric Nicholson  
Incorporator

STATE OF FLORIDA  
COUNTY OF LEON

I HEREBY CERTIFY that on this day, before me, a Notary Public duly authorized in the State and County named above to take acknowledgments, personally appeared Eric Nicholson, to me known to be the person described in and who executed the foregoing ARTICLES OF INCORPORATION, and acknowledged before me that HE executed the same for the uses and purposes therein expressed.

WITNESS my hand and official seal in the State and County named above this 6<sup>TH</sup> day of OCTOBER, 2000.



NOTARY PUBLIC

My Commission Expires:

Identification Provided:



Sharon L. Courey  
MY COMMISSION # CC922254 EXPIRES  
July 24, 2004  
BONDED THROUGH TROY EAIN INSURANCE, INC.

**ACCEPTANCE BY REGISTERED AGENT**

Eric Nicholson, having been named as the registered agent in the foregoing Articles of Incorporation of Eric Nicholson, M.D., P.A., to accept service of process for the corporation at 1843 Fiddler Court, Tallahassee, Florida 32308, hereby agrees to act as the registered agent and comply with the law of the State of Florida relative to such position.



Eric Nicholson

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