

P00000099515

Florida Department of State

Division of Corporations

Public Access System

Katherine Harris, Secretary of State

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H00000055716 5)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 922-4001

From:

Account Name : HUBCO
Account Number : 104662003400
Phone : (516) 935-3940
Fax Number : (516) 935-3088

FLORIDA PROFIT CORPORATION OR P.A.

Sebastian Inlet Anesthesiology, Inc.

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$78.75

F H I L
SECRETARY OF STATE
DIVISION OF CORPORATIONS
00 OCT 23 PM 12:28

B. McKnight OCT 23 2000

ARTICLES OF INCORPORATION

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:

Sebastian Inlet Anesthesiology, Inc.

ARTICLE II PRINCIPAL OFFICE

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

Sebastian Inlet Anesthesiology, Inc.
13695 U.S. HIGHWAY 1
SEBASTIAN, FL 32958

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
00 OCT 23 PM 12:28

ARTICLE III SHARES

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

1,500 Shares at No Par Value

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

THOMAS GAYESKI
13695 U.S. HIGHWAY 1
SEBASTIAN, FL 32958

Prepared By:

Bruce B. Hubbard
77 East John St.
Hicksville, New York 11801
1-516-935-3940

H00000055716

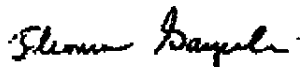
ARTICLES V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

THOMAS GAYESKI
9480 SEA GRAPE DRIVE
VERO BEACH, FL 32963

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

20th day of October 2000.



THOMAS GAYESKI
SIGNATURE

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN THE DESIGNATING THE REGISTERED OFFICE/AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: **Sebastian Inlet Anesthesiology, Inc.**

2. The name and address of the registered agent and office is:

THOMAS GAYESKI

Name

13695 U.S. HIGHWAY 1

(P.O. Box or Mail Drop Box NOT Acceptable)

SEBASTIAN, FL 32958

(City / State / Zip)

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 the statutes relating to the proper and complete performance of my duties, and am familiar with and accept the obligations of my position as registered agent.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
00 OCT 23 PM 12:28

Thomas Gayeski
ALEX TRASOBARES
SIGNATURE

10/20/00

(Date)