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Transmittal Letter

FILED

01 JAN 11 PM 4:12

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

SUBJECT: **MILIND SHASTRI MD PA**

(Proposed corporate name - must include suffix)

800003533448--3

-01/11/01--01093--005

*****70.00 *****70.00

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

() \$70.00 () \$78.75 () \$122.50 () \$131.25

FROM:

MILIND SHASTRI

Name (printed or typed)

9404 PEBBLE BEACH CT WEST

Address

SEMINOLE, FL-33777

City, State, & Zip

(727) 409-6649

Daytime Telephone Number

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

Articles of Incorporation

Of

MILIND SHASTRI MD PA

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Corporation Act 621, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

MILIND SHASTRI MD PA

ARTICLE II PRINCIPAL OFFICE

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

9404 PEBBLE BEACH CT WEST, SEMINOLE, FL-33777

NATURE OF BUSINESS: MEDICAL PRACTICE

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

MILIND SHASTRI
9404 PEBBLE BEACH CT WEST, SEMINOLE, FL-33777
PLANT CITY, FL-33567

Article V - Incorporator(s)

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

MILIND SHASTRI
9404 PEBBLE BEACH CT WEST
SEMINOLE, FL-33777

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

9th Day of January, 2001



Signature

Signature

Signature

Signature

Articles of Incorporation
Filing Fee - \$35

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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.

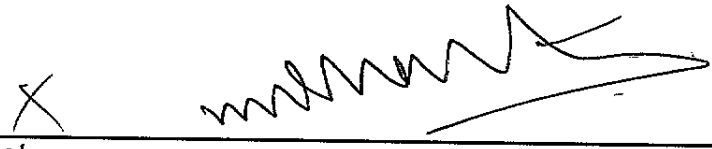
1. The name of the corporation is:

MILIND SHASTRI MD PA

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

MILIND SHASTRI
9404 PEBBLE BEACH CT WEST
SEMINOLE, FL-33777

Having been named as the registered agent and to accept service of process for the above


Signature

DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314