

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

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(Proposed corporate name - must include suffix)

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:

#### **MOHAMAD MUNIR**

Name (printed or typed)

#### 18116 ASHTON PARKWAY

Address

TAMPA,FL-33647

City, State, & Zip

813-973-2137

Daytime Telephone Number

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

-05/29/01 --01105--019 \*\*\*\*\*70.00 \*\*\*\*\*70.00

## **Articles of Incorporation** Of MOHAMAD MUNIR MD PA

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

#### Article I - Name

The name of the corporation shall be:

MOHAMAD MUNIR MD PA

Article II - Principal Office

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

**18116 ASHTON PARKWAY TAMPA,FL-33647** 

Nature Of Business: Medical

#### Article III - Shares

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

100

## Article IV - Initial Registered Agent and Street Address

The name and address of the initial registered agent is

MOHAMAD MUNIR 18116 ASHTON PARKWAY TAMPA,FL-33647

### Article V - Incorporator(s)

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

MOHAMAD MUNIR 18116 ASHTON PARKWAY TAMPA,FL-33647

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

7220	Day of	MAY	2001	
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		Signati	ure	
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Articles of Incorporation Filing Fee - \$35

# CERTIFICATE OF DESIGNATION OF REGISTERED AGENT / REGISTERED OFFICE

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:

#### **MOHAMAD MUNIR MD PA**

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

MOHAMAD MUNIR 18116 ASHTON PARKWAY TAMPA,FL-33647



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