01000072514

TRANSMITTAL LETTER

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

SUBJECT:	ASAP ANESTHESIA SERVICE, INC.	500004487455
	(proposed corporate name)	-07/28/81 -01959 - 006 *****78.75 *****78.75
		c C
Enclosed please	find an original and one (1) copy of the a	articles of incorporation for the
above corporation	on and check in the amount of \$_78.75	
	•	
FROM:	Janet Kinzie	E E E
	Name	
	22104 68th Avenue, East	JUL 20 AU LANASSEE,
	Address	
	Bradenton, FL 34202	OF SELECTION
	City, State, & Zip	H 10: 59
	(941) 322-6012	HDA 59
	Telephone Number	

Note: Additional copy of articles is needed only when certified copy is requested.

ARTICLES OF INCORPORATION

OF

_ASAP	ANESTHESIA	SERVICE.	TNC
		~~!!!	T110-

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:

ASAP ANESTHESIA SERVICE, INC.

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SECHETABY OF STATE
SECHETABY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

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

22104 68th Avenue, East

ARTICLE III CAPITAL STOCK

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

500 Shares @ \$1.00 par value per share.

ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:

Janet Kinzie 22104 68th Avenue, East Bradenton, FL 34202

ARTICLE V INCORPORATOR(S)

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

Janet Kinzie 22104 68th Avenue, East Bradenton, FL 34202

AI	CITCLE VI NATURE OF BUSIN	ESS	مصارف
Provider of Anesthesia S	f the Professional Associa ervices. ance with Florida Statutes		
The undersigned has(have) (executed these Articles of Inc	orporation this	
12th day of	July,	2001	-
•	x Junut Kunzu Signature/	President Title	er muss me
	Signature/	Title	المستداد المستداد
	Signature/	Title	

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section 607.0501, Florida Statutes, the undersigned corporation, organized under the laws of the tate 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: ASAP ANESTHESIA SERVICE, INC.	
2.	The name and address of the registered agent and office is:	
	Janet Kinzie	>
	(NAME)	
	22104 68th Avenue, East	≣ ≟_ <u>∓</u>
	(P.O. BOX NOT ACCEPTABLE)	
	Bradenton, FL 34202	₹ 5 15 15 15 15 15 15 15 15 15 15 15 15 15
	(CITY/STATE/ZIP) 夏点	<u>U</u>
	SIGNATURE WALKER Georporate officer) TITLE President	·
	. DATEJuly_12, 2001	· ·

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.

DATE July 12, 2001