

PO1000086413

TRANSMITTAL LETTER

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

800004564068--9  
-08/30/01--01046--014  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

SUBJECT:

Beaches Skin & Vein Center, PA

(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  
Filing Fee

☐ \$78.75  
Filing Fee  
& Certificate of Status

☒ \$78.75  
Filing Fee  
& Certified Copy

☐ \$87.50  
Filing Fee,  
Certified Copy  
& Certificate of  
Status

ADDITIONAL COPY REQUIRED

FROM: JAIME RESTREPO

Name (Printed or typed)

5423 NW 55TH TERRACE

Address

COCONUT CREEK, FL 33073

City, State & Zip

954-448-0673

Daytime Telephone number

01 AUG 30 PM 1:57  
FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

JS 8/31/01

**ARTICLES OF INCORPORATION**

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

FILED

01 AUG 30 PM 1:57

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE I NAME**

The name of the corporation shall be:

Beaches Skin & Vein Center, PA

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

12077 Classic Drive - Coral Springs, Florida 33071

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Medical Practice

**ARTICLE IV SHARES**

The number of shares of stock is:

10,000 shares - .001 par

**ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)**

The name(s) and address(es):

Brian Sandler  
12077 Classic Dr.  
Coral Springs, FL 33071

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address of the registered agent is:

JAIME RESTREPO - 5423 NW 55TH TERRACE - COCONUT CREEK, FL 33073

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

JAIME RESTREPO - 5423 NW 55TH TERRACE - COCONUT CREEK, FL 33073

\*\*\*\*\*  
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

  
Signature/Registered Agent

8/17/01  
Date

  
Signature/Incorporator

8/17/01  
Date