

TRANSMITTAL LETTER

PD10000095892

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

000004617790--3
--10/01/01--01043--003
*****78.75 *****78.75

SUBJECT: South Shore Arthritis Osteoporosis Clinic, P.A.
(Proposed corporate name - must include suffix)

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

\$ 78.75

Filing Fee &
Certificate

FROM: Carlos Ganuza
Name (printed or typed)

5940 Main St.
Address

New Port Richey, FL 34652
City, State & Zip

727-841-6500
Daytime Telephone Number

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

01 OCT -1 PM 12:56

FILED

NOTE: PLEASE PROVIDE THE ORIGINAL AND ONE COPY OF THE ARTICLES.

(A)

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:

South Shore Arthritis Osteoporosis Clinic, P.A.

ARTICLE II PRINCIPAL OFFICE

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

5940 Main Street
New Port Richey, FL 34652

ARTICLE III PURPOSE

The purpose of this corporation is:

The purpose of this corporation is to practice medicine.

ARTICLE III SHARES

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

500

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Carlos Ganuza
5940 Main St.
New Port Richey, FL 34652

FILED
01 OCT - 1 PM 12:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE V INCORPORATOR(S)

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

Carlos Ganuza
10022 Maybrook Ct.
New Port Richey, FL 34654


ARTICLE VI INITIAL OFFICER(S) & DIRECTOR(S)

The name(s) and street address(es) of the initial officers and directors is(are):

Carlos Ganuza - Dir/Pres./Treas.
10022 Maybrook Ct.
New Port Richey, FL 34654

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

28th day of 09, 2009.


Signature

CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE

FILED
01 OCT -1 PM 12:56
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: South Shore Arthritis Osteoporosis Clinic, P.A.

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

Carlos Ganuza

(Name)

5940 Main St.

(P.O. Box not acceptable)

New Port Richey, FL 34652

(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 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.


Signature

9/28/01
Date