

P01000110795

Florida Department of State
Division of Corporations
Public Access System
Katherine Harris, Secretary of State

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H01000115414 4))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations
Fax Number : (850) 205-0381

From: Account Name : ACE INDUSTRIES, INC.
Account Number : 070744001530
Phone : (305) 358-2571
Fax Number : (305) 358-7832

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
01 NOV 20 AM 10:37

FLORIDA PROFIT CORPORATION OR P.A.

TOBIAS NOBIGROT, M.D., P.A.

| | |
|-----------------------|---------|
| Certificate of Status | 0 |
| Certified Copy | 1 |
| Page Count | 01 |
| Estimated Charge | \$78.75 |



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

November 19, 2001

ACE

SUBJECT: TOBIAS NOBIGROT, M.D., P.A.
REF: W01000026459

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The specific nature of business of the professional association must be stated in the document.

If you have any further questions concerning your document, please call (850) 245-6067.

Neysa Culligan
Document Specialist
New Filing Section

FAX And. #: H01000115414
Letter Number: 701A00061989

H01-115414

Articles of Incorporation

Article 1: Name of Corporation: **TOBIAS NOBIGROT, M.D., P.A.**

Address of Corporation: **2451 BRICKELL AVE., #21-G
MIAMI, FLORIDA 33129**

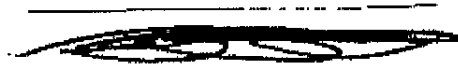
Article 2: Capital Stock: The number of shares which the corporation has authorized to be outstanding at any one time is **100**, with a par value of **OMIT**.

Article 3: REGISTERED AGENT: **RICHARD A. BERKOWITZ**

REGISTERED OFFICE: **ONE SE THIRD AVE., 15TH FLOOR
MIAMI, FLORIDA 33131**

Article 4: CORPORATE PURPOSE: **PRACTICE OF MEDICINE**

*I am familiar with and hereby accept the duties and responsibilities as Registered Agent for said corporation.



Signature of Registered Agent

Article 5: The Board of Directors are: (Board of Directors is NOT REQUIRED).
First listed is President, Second is Vice President, then Secretary/Treasurer.

- 1.
- 2.
- 3.

Article 6: The NAME and ADDRESS of the INCORPORATOR is:

**TOBIAS NOBIGROT
2451 BRICKELL AVE., #21-G
MIAMI, FLORIDA 33129**

In witness whereof, I have subscribed my name:


Signature of Incorporator

H01-115414

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
01 NOV 20 AM 10:37