

OFFICE USE ONLY

EXPRESS CORPORATE FILING SERVICE INC.

(Requestor's Name)

1000 PONCE DE LEON BLVD. STE: 101

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CORAL GABLES, FL 33134 305-444-4994

(City, State, Zip)

(Phone #)

900004765869--6  
-01/10/02--01087--007  
\*\*\*\*\*236.25 \*\*\*\*\*78.75

OFFICE USE ONLY

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. GRACE SAQUI CRNA, P.A.  
(Corporation Name) (Document #)
2. \_\_\_\_\_  
(Corporation Name) (Document #)
3. \_\_\_\_\_  
(Corporation Name) (Document #)
4. \_\_\_\_\_  
(Corporation Name) (Document #)

☐ Walk in

☒ Pick up time \_\_\_\_\_

☒ Certified Copy

☐ Mail out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

NEW FILINGS	
<input checked="" type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

Examiner's Initials

**ARTICLES OF INCORPORATION  
OF  
GRACE SAQUI CRNA, P.A.**

The undersigned incorporator, a natural person competent to contract, hereby forms a corporation under the laws of the State of Florida.

**ARTICLE I - NAME**

The name and address of this corporation shall be:

GRACE SAQUI CRNA, P.A.  
14150 SW 16 STREET  
MIAMI, FL 33175

**ARTICLE II - EXISTANCE**

The corporation shall have perpetual existence.

**ARTICLE III - PURPOSE OF CORPORATION**

The general nature of the business to be transacted, and the purpose of the corporation is rendering professional and nursing anesthesia related services and shareholders of the corporation shall be individuals duly licensed or otherwise legally authorized to render the same foregoing professional services.

**ARTICLE IV - CAPITAL STOCK**

The aggregate number of shares which the corporation shall have authority to issue is 1,000 shares of common stock having \$ 1.00 par value.

**ARTICLE V - PREEMPTIVE RIGHTS**

Every shareholder, upon the sale for cash of any new stock of this corporation of the same kind, class or series as that which he already holds, shall have the right to purchase his prorata share thereof (as nearly as may be done without issuance of fractional shares) at the price at which it is offered to others.

**ARTICLE VI - NAME OF REGISTERED  
AGENT AND ADDRESS OF REGISTERED OFFICE**

The name and street address of the corporation's initial registered resident agent shall be:

GRACE SAQUI  
14150 SW 16 STREET  
MIAMI, FL 33175

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SECRETARY OF STATE  
TALLAHASSEE FLORIDA

#### **ARTICLE VII - INITIAL BOARD OF DIRECTORS**

Initially this corporation shall have one director. The number of directors may be either increased or diminished from time to time by the by-laws but shall never be less than one. The name and address of the initial directors are:

Grace Saqui  
President/Director

14150 SW 16 Street  
Miami, FL 33175

#### **ARTICLE VIII - INCORPORATOR**

The name and address of the person signing these articles is :

GRACE SAQUI  
14150 SW 16 STREET  
MIAMI, FL 33175

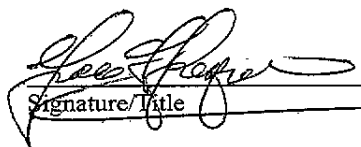
#### **ARTICLE IX - BY LAWS**

The power to adopt, alter, amend or repeal by-laws shall be vested in the Board of directors and shareholders.

#### **ARTICLE X - AMENDMENT**

The corporation reserves the right to amend or repeal any provisions contained in these Articles of Incorporation, or any amendment thereto, and any right conferred upon the shareholders is subject to this reservation.

The undersigned has (have) executed these Articles of Incorporation this 8th day of January 2002.

  
Signature/Title D/P

**CERTIFICATE OF DESIGNATION  
REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of Section 607.325, 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:

GRACE SAQUI CRNA, P.A.

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

GRACE SAQUI  
14150 SW 16 STREET  
MIAMI, FL 33175

Having been named to accept services of process for the above stated corporation, at the place designated in the certificate, I hereby agree to act in this capacity, and I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I accept the duties and obligations of Section 607.325, Florida Statutes.

SIGNATURE :



TITLE : President/Director

DATE : 1/8/02

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