

PO2000006543

TRANSMITTAL LETTER

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

900004732079--2  
-12/18/01--01057--002  
\*\*\*\*\*70.00 \*\*\*\*\*70.00

SUBJECT: Larry M Friedes M.D., P. A.  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

900004732519--7  
-12/19/01--01036--002  
\*\*\*\*\*70.00 \*\*\*\*\*70.00

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

☒ \$70.00      ☐ \$78.75  
Filing Fee      Filing Fee  
                         & Certificate of Status

☐ \$78.75      ☐ \$87.50  
Filing Fee      Filing Fee,  
& Certified Copy      Certified Copy  
                         & Certificate of  
                         Status  
ADDITIONAL COPY REQUIRED

FROM: Larry M. Friedes M.D.  
Name (Printed or typed)

3910 B Coastal Highway  
Address  
St Augustine, Florida 32084  
City, State & Zip  
904-824-8147  
Daytime Telephone number

FILED  
2001 DEC 19 PM 3:02  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

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

2228-624  
1001-29079  
624  
1002-454

12/18/02



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State

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SECRETARY OF STATE  
TALLAHASSEE FLORIDA

January 7, 2002

LARRY M. FRIEDES M.D.  
3910 B COASTAL HIGHWAY  
ST. AUGUSTINE, FL 32084

SUBJECT: LARRY M. FRIEDES M.D., P.A.  
Ref. Number: W02000000454

We have received your document for LARRY M. FRIEDES M.D., P.A. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must have original signatures.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6973.

Claretha Golden  
Document Specialist  
New Filings Section

Letter Number: 402A00000731



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State

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SECRETARY OF STATE  
TALLAHASSEE FLORIDA

December 20, 2001

LARRY M. FRIEDES M.D.  
3910 B COASTAL HIGHWAY  
ST. AUGUSTINE, FL 32084

SUBJECT: LARRY M. FRIEDES M.D., P.A.  
Ref. Number: W01000029079

We have received your document for LARRY M. FRIEDES M.D., P.A. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A corporation may not act as its own incorporator. Please designate an individual, another active domestic or foreign corporation, with a street address.

The document must have original signatures.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6973.

Claretha Golden  
Document Specialist  
New Filings Section

Letter Number: 901A00066557

EFFECTIVE DATE

01/01/02

**ARTICLES OF INCORPORATION**

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

**FILED**

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SECRETARY OF STATE  
TALLAHASSEE FLORIDA

**ARTICLE I NAME**

The name of the corporation shall be: Larry M. Friedes M.D., P.A.  
3910 B Coastal Highway  
St. Augustine, Florida 32084

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is: 3910 B Coastal Highway  
St. Augustine, Florida 32084

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: Medical Office

**ARTICLE IV SHARES**

The number of shares of stock is: 500 Shares

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

The name(s), address(es) and title(s):

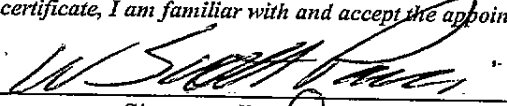
**ARTICLE VI REGISTERED AGENT**

The name and Florida street address of the registered agent is: W. Scott Pacetti  
136 Malaga Street  
St. Augustine, Florida  
32084

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is: Larry M. Friedes  
3910 B Coastal Highway  
St. Augustine, Florida 32084

\*\*\*\*\*  
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

12-18-01  
Date

  
Signature/Incorporator

12-18-01  
Date

Article VIII : Effective Date Will Be January 1, 2002.

**FILED**

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TALLAHASSEE FLORIDA