

# P02000069545

TRANSMITTAL LETTER

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

100005728321--9  
-06/10/02--01044--009  
\*\*\*\*\*87.50 \*\*\*\*\*87.50

**SUBJECT:** Cardiovascular and Thoracic Surgical Services of Tampa Bay, P.A.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are 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:** Enrique Lopez-Cuenca, M.D.

Name (Printed or typed)

P.O. Box 13200

Address

Tampa, FL 33681

City, State & Zip

813-230-1173

Daytime Telephone number

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

02 JUN 24 AM 8:32

FILED

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

m 6/25



FLORIDA DEPARTMENT OF STATE

Katherine Harris  
Secretary of State

June 11, 2002

ENRIQUE LOPEZ-CUENCA, M.D.  
P.O.BOX 13200  
TAMPA, FL 33681

SUBJECT: CARDIOVASCULAR AND THORACIC SURGICAL SERVICES OF  
TAMPA BAY, P.A.  
Ref. Number: W02000016994

We have received your document for CARDIOVASCULAR AND THORACIC  
SURGICAL SERVICES OF TAMPA BAY, P.A. and your check(s) totaling \$87.50.  
However, the enclosed document has not been filed and is being returned for the  
following correction(s):

The effective date is not acceptable since it is not within five working days of the  
date of receipt.

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) 245-6067.

Neysa Culligan  
Document Specialist  
New Filing Section

Letter Number: 002A00038358

## ARTICLES OF INCORPORATION

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

### ARTICLE I NAME

The name of the corporation shall be:

Cardiovascular and Thoracic Surgical Services of Tampa Bay, P.A.

### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

Cardiovascular and Thoracic Surgical Services of Tampa Bay, P.A.  
P.O. Box 13200  
Tampa, FL 33681

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Medical Office

### ARTICLE IV SHARES

The number of shares of stock is:

100,000

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

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

Enrique Lopez-Cuenca, M.D. (President)  
P.O. Box 13200  
Tampa, FL 33681

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

### ARTICLE VI REGISTERED AGENT

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

Enrique Lopez-Cuenca, M.D.  
3409 S. Beach Dr.  
Tampa, FL 33629

### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Enrique Lopez-Cuenca, M.D.  
3409 S. Beach Dr.  
Tampa, FL 33629

\*\*\*\*\*

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

Signature/Incorporator

6-21-02  
Date

6-21-02  
Date