P.01 Aug-29-02 11:11A Division of Corporations Florida Department of State Division of Corporations Public Access System 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. (((H02000188538 1))) Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet. 52 90M To: Division of Corporations ; (850)205-0381 Fax Number From: : LORN LEITMAN, C.P.A. Account Name Account Number : 119980000088 : (305)279-8943 Phone : (305)271-4421 Fax Number

FLORIDA PROFIT CORPORATION OR P.A.

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8/29/02

EKG Readers of Mt. Sinai, Inc

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ARTICLES OF INCORPORATION OF EKG Readers of Mt. Sinai, Inc

The undersigned, for the purpose of forming a corporation under the Florida General Corporation Act, does hereby adopt the following articles of incorporation:

ARTICLE 1

The name of the corporation is EKG Readers of Mt. Sinai, inc.

ARTICLE II

The term of the existence of the corporation is perpetual. The inception date of the corporation and the day it began operations is <u>September 1st, 2002</u>.

ARTICLE III

The general purposes for which the corporation is to provide professional EKG interpretation.

ARTICLE IV

The aggregate number of shares of stock which the corporation is authorized to issue is One Hundred (100).

<u>ARTICLE V</u>

The street address of the initial registered office and the principal place of business of the corporation is <u>7700 North Kendall Drive</u>, <u>Suite 405</u>, <u>Miami</u>, <u>FL 33156</u>, and the name of the agent at such address is : <u>Lorn Leitman</u>.

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Lorn Leitmon, Esquire 7700 North Kendall Drive, Suite 405. Miami, FL 33156 (305) 279-8943 Tax (305) 271-4421

Bar Number: 562238

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ARTICLE VI

The number of directors constituting the initial board of directors of the corporation s TWO (4). The name and address of the person/persons who is/are to serve as initial boord are:

Name	Address
Lorn Leitman (D)	6850 Pallazzo Coral Gables, FL 33146
Philip Samet, MD (P)	4300 Alton Road
	Miami Beach, FL
Alan Hyman, MD (VP)	4300 Alton Road
	Miami Beach. Fl
Frances Glickman, MD (Trea)	4300 Alton Road
	Miami Beach, FL

ARTICLE VII

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

<u>Name</u>

Address

Lorn Leitman (P)

6850 Pallazzo Coral Gables, Fl 33146

Executed by the undersigned at Miami, Dade County, Florida on this $\frac{28}{28}$ day of Cargust . 20 02

Lorn Leitman

7700 North Kendall Drive, Suite 405, Miami, FL 33156 (305) 279-8943 fax (305) 271-4421

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ACCEPTANCE BY REGISTERED AGENT:

Having been name to accept service of process for the above named corporation at a capacity place designated in these Articles of Incorporation. I hereby accept to act in this, and agree to comply with the provision of Chapter 48.091, Florida Statutes, relative to keeping open said office for service of process.

STATE OF FLORIDA) COUNTY OF DADE): SS :

Before me, the undersigned authority, personally appeared Lorn Leitman to me well known to be the person who executed the foregoing ARTICLES OF INCORPORATION and acknowledged before me, according to law, that he made and subscribed the same for the purposes therein mentioned and set forth

IN WITNESS WHEREOF. I have hereunto set my hand and seal this $\frac{28}{10}$

cuguet 20 0 2 day of

Notary Pyblicr \sim

My Commission Expires:



7700 North Kendall Drive, Suite 405, Miami, FL 33156

Lorn Leitman, Esquire

Bar Number: 562238

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CERTIFICATE DESIGNATION (OR CHANGING) PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN THIS STATE, NAMING AGENT UPON WHOM PROCESS MAY BE SERVED.

In pursuance of Chapter 607.34 Florida Statutes, the following is submitted, in compliance with sold Act:

First - That <u>EKG Readers of Mt. Sinai, Inc.</u> desiring to organize under the laws of the State of <u>Florida</u>, with its principal office, as indicated in the articles of incorporation at City of <u>Miami</u>.

County of ______Miami-Dade _____ State of ______Florida______

has named <u>Lorn Leitman</u> (Name of Registered Agent)

located at _____7700 North Kendall Drive, Suite 405 ____

City of _____Miami ____ County of ____Miami-Dade ____

State of Horidg, as its agent to accept service of process within this state.

ACKNOWLEDGMENT: (MUST BE SIGNED BY DESIGNATED AGENT) Having been named to accept service of process for the above stated corporation, at place designated in this certificate, 1 hereby accept to act in this capacity, and agree to comply with the provision of said Act relative to keeping open said office.

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Bar Number: 562238

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