Q116PP0000609

TRANSMITTAL LETTER

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

		ysiology Consultant te name - mustinclude s		· .	
			60000 -08/ ***	12/0201	
Enclosed is an original a	nd one (1) co	ppy of the articles of	incorporatio	n and a ch	neck
for: \$70.00 Filling Fee	\$78.75 Filing Fee & Certificate	\$122.50 Filing Fee _ & Certified Copy	\$131.: Filing Fer Certified C & Certifica	e, Jopy	
FROM:		lectrophysiology Co	onsultants,	PA —	
	562 Whis	pering Pine Lane	· —	2002 17ALL	-
	Naples,	Address Florida 34103	-	SEP -3.	
	(239) 43	City, State & Zip 6-3585		PN 3: 55 UF STATE I FLORIDE	
$\frac{\lambda_{p}}{\lambda_{p}}$	Dayti	me Telephone number		<u>-</u> ⊵,., വ	

630 602-23531

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

49/3/02



FLORIDA DEPARTMENT OF STATE Jim Smith Secretary of State

2002 SEP -3 PM 3: 55

SEUNITARY OF STATE TALLAHASSEE FLORIDA

August 14, 2002

NAPLES ELECTROPHYSIOLOGY CONSULTANTS PA 562 WHISPERING PINE LANE NAPLES, FL 34103

SUBJECT: NAPLES ELECTROPHYSIOLOGY CONSULTANTS, PA

Ref. Number: W02000023531

We have received your document for NAPLES ELECTROPHYSIOLOGY CONSULTANTS, PA and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

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

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: 302A00048217

1000

ARTICLES OF INCORPORATION

2002 SEP -3 PM 3:55

Scond IARY OF STATE TALLAHASSEE FLORIDA

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

Naples Electrophysiology Consultants, PA

PURPOSE: MEDICAL DOCTOR (18)
ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

562 Whispering Pine Lane Naples, Florida 34103

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

10,000

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Richard E. Taylor 3150 N. Wickham Rd., Ste 3 Melbourne, FL 32935 (321) 242-7547

ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

Dr. Kenneth Webb Plunkitt, President 562 Whispering Pine Läne Naples, Florida 34103

Patrice Harlene Davis, Sec'y/Treasurer 562 Whispering Pine Läne Naples, Florida 34103

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

1	7-7H	day of	August		, 19	, •
		AN)][][e	-		
	Dr. Ken	nneth W. Plunk	itt Sig	nature Voc	President _	
	Patrice	e Harlene Davi	s Sig	nature	Secretary/Tre	asurer
			Sig	nature		

Articles of Incorporation Filing Fee - \$35

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 or 617.0501, 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 nom	e of the corp	oration is: Nap.	les Electrophysic	ology Consultants,	PA
				_	
N	ATURE OF	Business:	MEDICAL	DOCTORIE	

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

Richard E. Taylor	SEG	2002	Market San
(Name)	AH	SEP	A
3150 N. Wickham Rd., Ste 3	ASS	ယ်	हा स्कार होते. हे के के
(P.O. Box not acceptable)	# C	-0 -K	1
Melbourne, FLorida 32935	STA LOR	ယ္	-
(City/State/Zip)		55	

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

(Signature)
Richard E. Taylor

August ______, 2002
(Date)

DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314