

TRANSMITTAL LETTER  
P02000099519

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

300007701203--4  
-09/12/02--01075--002  
\*\*\*\*\*87.50 \*\*\*\*\*87.50

SUBJECT: JARROD Frydman D.O., 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: JARROD Frydman D.O., P.A.  
Name (Printed or typed)  
9708 Vineyard Ct.  
Address  
BOCA RATON, FLORIDA 334  
City, State & Zip  
561-488-2298  
Daytime Telephone number

FILED  
02 SEP 12 AM 9:34  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

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

D. WHITE SEP 16 2002 2

# ARTICLES OF INCORPORATION

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

FILED

## ARTICLE I NAME

The name of the corporation shall be:

JARROD FRYDMAN D.O., P.A.

02 SEP 12 AM 9:34  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

9768 Vineyard Court  
BOCA RATON, FL. 33428

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To establish A medical practice  
Under A P.A.

## ARTICLE IV SHARES

The number of shares of stock is:

100 shares.

## ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

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

JARROD Frydman D.O.  
9768 Vineyard Ct  
Boca Raton, FL 33428

## ARTICLE VI REGISTERED AGENT

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

JARROD Frydman D.O.  
9768 Vineyard Ct.  
Boca Raton, FL. 33428

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

JARROD Frydman D.O.  
9768 Vineyard Ct  
Boca Raton, FL. 33428

\*\*\*\*\*

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

Date

Signature/Incorporator

Date