

P030000032188

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

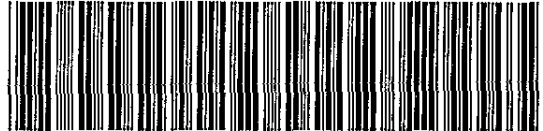
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



300014230423

11/27/03--01082--007 \*\*78.75

FILED  
03 MAR 17 PM 12:43  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

T. SMITH MAR 20 2003

## TRANSMITTAL LETTER

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

SUBJECT: MITCHELL FORMAN, M.D., 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: MITCHELL FORMAN, M.D.  
Name (Printed or typed)

5046 Wesley Drive  
Address

TAMPA FL 33647  
City, State & Zip

813-631-8539  
Daytime Telephone number

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

## ARTICLES OF INCORPORATION

OF

MITCHELL FORMAN, M.D., P.A.

The undersigned incorporator hereby executes these Articles of Incorporation for the purpose of forming a corporation for profit in accordance with the laws of the State of Florida.

### ARTICLE 1

#### NAME

The name of this corporation shall be: **Mitchell Forman, M.D., P.A.**

### ARTICLE 2

#### PRINCIPAL OFFICE AND MAILING ADDRESS

The address of the principal office and the mailing address of this corporation shall be:

5046 Wesley Drive  
Tampa, FL 33647

### ARTICLE 3

#### CAPITAL STOCK

1. **Authorized Capitalization.** The total number of shares of capital stock authorized to be issued by this Corporation shall be:

100,000 shares of common stock, par value \$.001 per share (the "Common Stock").

2. **Payment for Stock.** All or any part of the consideration for the issuance of the capital stock of this Corporation may be in cash, property or labor or services at a fair valuation to be fixed by the Board of Directors at a meeting called for that purpose, which consideration, in any event, shall not be less than the par value of the shares issued therefore. All stock when issued shall be fully paid and nonassessable.

3. **Voting.** The voting power of this Corporation shall be vested solely in the Common Stock. Holders of shares of Common Stock shall be entitled to one vote for each share of Common Stock. There shall be no cumulative voting in the election of directors.

FILED  
03 MAR 17 PM 2:43  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION OF  
MITCHELL FORMAN M.D., P.A.  
PAGE 2

4. **Dividends.** Any and all dividends are to be shared among the holders of outstanding Common Stock on a share for share basis.

ARTICLE 4

**REGISTERED OFFICE AND REGISTERED AGENT**

The initial registered office of this corporation shall be located at 5046 Wesley Drive, Tampa, FL 33647 and the initial registered agent of this corporation at such office shall be Mitchell Forman. This corporation shall have the right to change such registered agent and such registered office from time to time, as provided by law.

ARTICLE 5

**BOARD OF DIRECTORS**

The Board of Directors of this corporation shall consist of a number of directors to be fixed from time to time by the stockholders or the bylaws. The business and affairs of this corporation shall be managed by the Board of Directors, which may exercise all such powers of this corporation and do all such lawful acts and things as are not by law directed or required to be exercised or done only by the stockholders.

ARTICLE 6

**INITIAL BOARD OF DIRECTORS**

The initial Board of Directors of this corporation shall consist of one (1) member, such member to hold office until his successor(s) have been duly elected and qualify. The names and street addresses of the initial director is:

<b><u>Name</u></b>	<b><u>Address</u></b>
Mitchell Forman	5046 Wesley Drive Tampa, FL 33647

ARTICLE 7

**INCORPORATOR**

The name and street address of the incorporator making these Articles of Incorporation is:

ARTICLES OF INCORPORATION OF  
MITCHELL FORMAN M.D., P.A.  
PAGE 3

<u>Name</u>	<u>Address</u>
Mitchell Forman	5046 Wesley Drive Tampa, FL 33647

ARTICLE 8

PURPOSES AND DURATION

The purpose for which the corporation is organized shall be to engage in the practice of primary care/internal medicine within the State of Florida, and to take all actions that are necessary or proper in connection with that practice. The professional services of the corporation shall be rendered only through officers, employees and agents who are licensed to practice primary care/internal medicine in the State of Florida.

ARTICLE 9

BYLAWS

The power to adopt the bylaws of this corporation, to alter, amend or repeal the bylaws, or to adopt new bylaws, shall be vested in the Board of Directors of this corporation.

ARTICLE 10

AMENDMENT OF ARTICLES OF INCORPORATION

This corporation reserves the right to amend, alter, change or repeal any provisions contained in these Articles of Incorporation in the manner now or hereafter prescribed by statute, and all rights conferred upon the stockholders herein are subject to this reservation.

ARTICLE 11


AFFILIATED TRANSACTIONS

The provisions of Section 607.0901, Florida Statutes, relating to affiliated transactions, shall be inapplicable to this corporation.

ARTICLES OF INCORPORATION OF  
MITCHELL FORMAN M.D., P.A.  
PAGE 4

**IN WITNESS WHEREOF**, the undersigned incorporator has executed these Articles of Incorporation for the uses and purposes therein stated.

**DATED** this 13 day of March, 2003.

  
\_\_\_\_\_  
Mitchell Forman, M.D.

**MITCHELL FORMAN, M.D., P.A.**

**ACCEPTANCE OF SERVICE AS REGISTERED AGENT**

The undersigned, Mitchell Forman having been named as registered agent to accept service of process for the above-named corporation at the registered office designated in the Articles of Incorporation, hereby agrees and consents to act in that capacity. The undersigned is familiar with and accepts the duties and obligations of such position.

**DATED** this 13 day of March, 2003.

  
\_\_\_\_\_  
Mitchell Forman, M.D.

**FILED**  
03 MAR 17 PM 12:43  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA