

# PD3000069307

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(Business Entity Name)

(Document Number)

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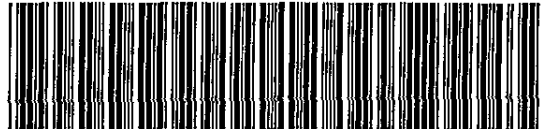
Certificates of Status \_\_\_\_\_

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05/21/03--01043--012 \*\*78.75

FILED  
03 JUN 23 PM 2:36  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

## TRANSMITTAL LETTER

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

SUBJECT: National Medical Group of Florida, Inc.  
(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: William Cushing  
Name (Printed or typed)

4965 E. Sabal Palm Blvd., #206  
Address

Tamarac, FL 33319  
City, State & Zip

954-465-8415  
Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE  
Glenda E. Hood  
Secretary of State

May 30, 2003

WILLIAM CUSHING  
4965 E SABAL PALM BLVD 206  
TAMARAC, FL 33319

SUBJECT: NATIONAL MEDICAL GROUP OF FLORIDA, INC.  
Ref. Number: W03000015343

We have received your document for NATIONAL MEDICAL GROUP OF FLORIDA, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Per our telephone conversation earlier today.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

**Adding "of Florida" or "Florida" to the end of a name is not acceptable.**

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) 245-6933.

Dale White  
Document Specialist  
New Filings Section

Letter Number: 803A00034076

## 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:

Physicians Access Group, Inc.

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SECRETARY OF STATE  
TALLAHASSEE FLORIDA

### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

6630 Biscayne Blvd.  
Miami, FL 33138

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Management and delivery of healthcare services

### ARTICLE IV SHARES

The number of shares of stock is:

1,000 common shares

### ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

Dr. Nisidibe Ikpe, President, 6630 Biscayne Blvd., Miami, FL 33138  
Dr. Rudolph Moise, Vice President, 671 NW 119th St., N. Miami, FL 33168

### ARTICLE VI REGISTERED AGENT

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

Dr. Nsidibe Ikpe, 6630 Biscayne Blvd., Miami, FL 33138

### ARTICLE VII INCORPORATOR

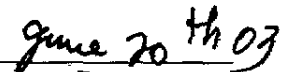
The name and address of the Incorporator is:

Dr. Nsidibe Ikpe, 6630 Biscayne Blvd., Miami, FL 33138

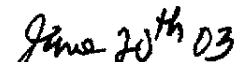
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Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

  
\_\_\_\_\_  
Signature/Registered Agent

  
\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Signature/Incorporator

  
\_\_\_\_\_  
Date