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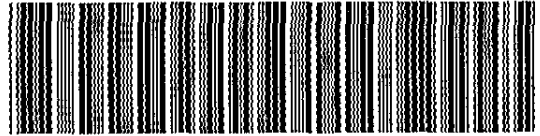
(Business Entity Name)

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EFFECTIVE DATE  
8-1-03

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August 1, 2003

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

FILED  
03 AUG -4 PM 3:52  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Subject: *Elvin M. Mendez, M.D. P.A.*

Dear Sir/Madam:

Enclosed is an original and one (1) copy each of the Articles of Incorporation, and Certificate of Designation Registered Agent/Registered Office.

Pursuant to Section 607.0123 Florida Statutes, effective date of said Corporation shall be August 1, 2003.

Enclosed also is a check in the amount of \$70.00 for the following:

- Filing of the two (2) above mentioned documents \$70.00

Sincerely,



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Elvin M. Mendez  
Registered Agent  
3380 Tamiami Trail, Suite A-1  
Port Charlotte, Florida 33952  
941-255-3722

# ***Articles of Incorporation***

***of***

***Elvin M. Mendez, M.D. P.A.***

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

The undersigned incorporator, for the purpose of forming a Corporation/ Professional Association, under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

Pursuant to Section 607.0123 Florida Statutes, effective date of said Corporation/ Professional Association shall be 12:01 a.m., August 1, 2003.

## **ARTICLE I - Name**

EFFECTIVE DATE  
8-1-03

The name of the Corporation/Professional Association shall be:

***Elvin M. Mendez, M.D. P.A.***

The address of the principal office of this Corporation/ Professional Association shall be:

3380 Tamiami Trail, Suite A-1  
Port Charlotte, Florida 33952

and the mailing address of the corporation shall be:

P. O. Box 511896  
Punta Gorda, Florida 33951-1896

## **ARTICLE II - Nature of Business**

This Corporation/Professional Association may engage or transact in any or all lawful activities or business permitted under the laws of the United States, the State of Florida or any other state, country, territory or nation.

### **ARTICLE III - Capital Stock**

The maximum number of shares of stock that this corporation/professional association is authorized to have outstanding at any one time is 1,000 (One Thousand) shares of common stock having \$1.00 par value per share.

### **ARTICLE IV - Initial Registered Agent and Street Address**

The name of the initial registered agent of the corporation/professional association is:

Elvin M. Mendez

and the street address of the initial registered office of the corporation/professional association shall be:

3380 Tamiami Trail, Suite A-1  
Port Charlotte, Florida 33952

### **ARTICLE V - Term of Existence**

Pursuant to Section 607.0123 Florida Statutes, effective date of said Corporation/Professional Association shall be 12:01 a.m., August 1, 2003.

This corporation/professional association is to exist perpetually.

### **ARTICLE VI - Incorporator(s)**

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

Elvin M. Mendez  
3380 Tamiami Trail, Suite A-1  
Port Charlotte, Florida 33952

### **ARTICLE VII - Initial Directors**

The initial directors/officers names and mailing addresses for the corporation/professional association:

**Director**  
Elvin M. Mendez  
P. O. Box 511896  
Punta Gorda, Florida 33951-1896

**President/Secretary/Treasurer**

Elvin M. Mendez  
P. O. Box 511896  
Punta Gorda, Florida 33951-1896

**ARTICLE VIII - Purpose of the Corporation/Professional Association**

This corporation/professional association may engage or transact in any or all lawful activities or business permitted under the laws of the United States, the State of Florida or any other state, country, territory or nation.

**ARTICLE IX - Management and Regulations**

IN WITNESS WHEREOF, the undersigned incorporator has executed these Articles of Incorporation this 1<sup>st</sup> day of August, 2003.



\_\_\_\_\_  
Elvin M. Mendez

## CERTIFICATE OF DESIGNATION

### REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Sections 607.0501 or 617.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designation the registered agent/registered office, in the State of Florida.

1. The name of the corporation/professional association is:

*Elvin M. Mendez, M.D. P.A.*

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

Elvin M. Mendez  
3380 Tamiami Trail, Suite A-1  
Port Charlotte, Florida 33952  
941-255-3722

Having been named as Registered Agent and to accept service of process for the above stated corporation/professional association 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.

Date: August 1, 2003



Elvin M. Mendez.  
Mailing address:  
P. O. Box 511896  
Punta Gorda, Florida 33951-1896

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