P03000096622

(Requestor's Name)

(Address)

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TALLAHASSEE, FLORIDA

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TRANSMITTAL LETTER

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

SUBJECT: ALL SAINTS ANESTHESIA & PAIN MANAGEMENT, 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: DANIEL O'ROURKE
Name (Printed or typed)

11377 CORTEZ BLVD.
Address

BROOKSVILLE, FL 34613
City, State & Zip

(352) 597-3060
* Daytime Telephone number

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

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

ALL SAINTS ANESTHESIA & PAIN MANAGEMENT, P.A.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

11377 CORTEZ BOULEVARD BROOKSVILLE, FL 34613

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To PROVIDE PAIN MANAGEMENT & ANESTHESIA SERVICE

ARTICLE IV SHARES

The number of shares of stock is:

1,000 - ONE THOUSAND

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

WALTER SZYDLOWSKI, M.D. - DIR.
LEONARD CACIOPPO, M.D. - DIR.
JAMES JACHIMOWICZ, M.D. - DIR.

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ARTICLE VI REGISTERED AGENT

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

ALL SAINTS SURGERY CENTER, INC.
11377 CORTEZ BLVD.
BROOKSVILLE, FL 34613

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

ALL SAINTS SURGERY CENTER, INC.
11377 CORTEZ BLVD.
BROOKSVILLE, FL 34613

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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: 8/26/03

Signature/Incorporator — Date: 8/26/03