## D3000124653

(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:
opeoid institutions to 1 ming officer.

Office Use Only



300024061113

10/24/03--01042--011 \*\*87.50

03 OCT 24 M1 10: 30

DA 11/4

## TRANSMITTAL LETTER

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

SUBJECT:	EZ-PEDS INC	.•		
	(PROPOSED CORPORA'	TE NAME – MUST INCL	UDE SUFFIX)	
Enclosed are an orig	inal and one (1) copy of the artic	cles of incorporation and	a check for:	
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED	
FROM:	ESTHERB, EISE Name	ENSTEIN M.D. (Printed or typed)	P.A.	
9909 Pines Blud  Address  Pembroke Pines, Fl. 33024  City, State & Zip  30= 954-431-8558  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)	FILED 03 OCT 24 AM I
ARTICLE I NAME	U3 OCT 24 AM
The name of the corporation shall be:	SEChi HIT I
ez peds inc	TALLAHOUS SEE FLO
ARTICLE II PRINCIPAL OFFICE	
The principal place of business/mailing address is:	
9909 Pines Blud	
Pembroke Pines, Fl. 33016	
ARTICLE III PURPOSE	
The purpose for which the corporation is organized is:	
Pediatric medical care	
ARTICLE IV SHARES	
The number of shares of stock is:	
60	
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS	
List name(s), address(es) and specific title(s):	
Mario D. Zambrano, M.D., President	
9909 Pines Blud	
Pembroke Pines Fl. 33016	
remote = 1 (1123 ,1 1. 333)	
ARTICLE VI REGISTERED AGENT	
The <u>name and Florida street address</u> of the registered agent is:	
Mario D. Zambrano, M.D	
9909 Pines Blud	
Pembroke Pines, Fl. 33016	
ARTICLE VII INCORPORATOR	
The <u>name and address</u> of the Incorporator is:	
Mario D. Zambrano, M.D	
9909 Pines Blud	
Pembroke Pines, Fl. 33016	
**************************************	**************************************
certificate, I am familiar with and accept the appointment as registered agent and agree t	
skew & Frankaus M.	10-15 07
Simply of Designation of A count	10-15-03
Signature/Registered Agent	Date
How Hambaus WO.	
~/ · · · · · / /	