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# TRANSMITTAL LETTER

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

SUBJECT: HAL MICHAEL BASS M.D., P.A.				
	(Proposed corpo	rate name - must include suf	fix)	
Enclosed is an origina	al and one(1) copy of the article	es of incorporation and a	check for:	
☐ \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED	
FROM:		UNTING, INC.	<del></del>	
	951 KENMORE ST	• NW	· · · · · · · · · · · · · · · · · · ·	
	PALM BAY, FL 3		· · · · · · · · · · · · · · · · · · ·	
	City,	State & Zip		
	(321) 722-	· · · · · · · · · · · · · · · · · · ·		
Daytime Telephone number				

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

#### ARTICLES OF INCORPORATION

03 NOV -5 PH 12: 19

OF

CECRETARY OF STATE TALLAHASSEE FLORIDA

# HAL MICHAEL BASS M.D., P.A.

The undersigned for the purpose of forming a corporation under the Florida General Corporation Act, hereby adopt the following Articles of Incorporation:

# **ARTICLE ONE**

#### NAME

The name of the corporation is HAL MICHAEL BASS M.D., P.A., whose address is 4875 North Federal Highway, Suite 500, Ft. Lauderdale, Florida 33308

# ARTICLE TWO

#### **DURATION**

The term of existence of the corporation is perpetual.

# ARTICLE THREE

#### **PURPOSE**

The corporation may transact any and all lawful business for which corporations may incorporate under the Florida General Corporations Act.

#### ARTICLE FOUR

# CAPITAL STOCK

The aggregate number of shares which the corporation has authority to issue is one thousand (1,000), all of which shall be common share with a par value of One Dollar (\$1.00).

# ARTICLE FIVE

#### PRE-EMPTIVE RIGHTS GRANTED

Each shareholder of any class of stock of this corporation shall be entitled to full preemptive rights to purchase any unissued or treasury shares of the corporation and any securities of the corporation convertible into or carrying a right to subscribe to or acquire shares of any such unissued or treasury shares.

# ARTICLE SIX

#### REGISTERED OFFICE

The street address of the initial registered office of the corporation is 4875 North Federal Highway, Suite 500, Ft. Lauderdale, Florida 33308 and the name of the initial registered agent at such address is HAL MICHAEL BASS.

# ARTICLE SEVEN

#### **DIRECTORS**

The board of directors of the corporation shall consist of one (1).

The name and address of the first board of directors is:

Hal Michael Bass

4875 No. Federal Highway, Ste. 500 Ft. Lauderdale, Florida 33308

# ARTICLE EIGHT

#### INCORPORATOR

The name and address of the incorporator is:

**NAME** 

**ADDRESS** 

Hal Michael Bass

4875 No. Federal Hwy., Ste. 500

Ft. Lauderdale, FL 33308

IN WITNESS THEREOF, I have subscribed my name;

Hal Michael Bass

Incorporator and Registered Agent

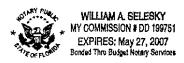
STATE OF FLORIDA COUNTY OF BROWARD

On this 30 day of 1000 2003, before me a Notary Public, the undersigned officer, personally appeared, Hal Michael Bass, known to me to be the person whose name is subscribed to the within instrument, and acknowledges that he executed the same for the purpose therein contained.

IN WITNESS THEREOF, I have hereunto set my hand and official seal.

My Commission Expires:

Notary Public



03 NOV -5 PH 12: 20 SECRETARY OF STATE TALLAHASSEE FLORIDA

# **ARTICLE NINE**

Name and address of Registered Agent is:

Hal Michael Bass

4875 No. Federal Hwy., Ste. 500 Ft. Lauderdale, FL 33308

"I hereby am familiar with and accept the duties and responsibilities as registered agent

for said corporation."

Hal Michael Bass Registered Agent

STATE OF FLORIDA **COUNTY OF BROWARD** 

On this 3x day of 1/2 somba 2003, before me a Notary Public, the undersigned officer, personally appeared, Hal Michael Bass, known to me to be the person whose name is subscribed to the within instrument, and acknowledges that he executed the same for the purpose therein contained.

IN WITNESS THEREOF, I have hereunto set my hand and official seal.

Notary Public

My Commission Expires:

