

P03000151959

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

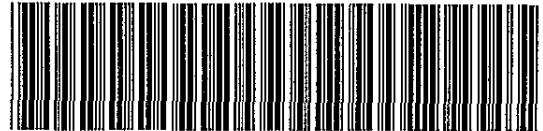
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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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: ALAN M. SALTOWITZ, MD, PA
(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

FROM: ALAN M. SALTOWITZ
Name (Printed or typed)

9488 LAKE SERENA DRIVE
Address

BOCA RATON, FL 33496
City, State & Zip

(954) 202-0300
Daytime Telephone Number

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

ARTICLES OF INCORPORATION

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In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit) SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be: ALAN M. SAITOWITZ, MD, PA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is: 9488 LAKE SERENA DRIVE
BOCA RATON, FL 33496

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Any lawful business practices and any medical practices deemed lawful through the state of Florida.

ARTICLE IV SHARES

The number of shares of stock is: 5000 common shares, par value \$1.00 per share.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

ALAN M. SAITOWITZ
9488 LAKE SERENA DRIVE
BOCA RATON, FL 33496
PRESIDENT

ARTICLE VI REGISTERED AGENT

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

ALAN M. SAITOWITZ
9488 LAKE SERENA DRIVE
BOCA RATON, FL 33496

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

ALAN M. SAITOWITZ
9488 LAKE SERENA DRIVE
BOCA RATON, FL 33496

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.

Allen M. Gentry
Signature/Registered Agent

11/25/07
Date

Allen M. Gentry
Signature/Incorporator

11/25/07
Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA