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# TRANSMITTAL LETTER

TALLAHASSEE FLORIDA

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

SUBJECT:

BREVARD FIRST ASSISTANTS, INC.

(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

**X** \$78.75

\_\_\_\_\$122.50

\_\_\_\$131.25

Filing Fee

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Filing Fee,

Certificate

Certified Copy

Certified Copy

& Certificate

FROM:

KELLI M. STROBEL

NAME (PRINTED OR TYPED)

5190 CINNAMON FERN BLVD.

ADDRESS

PORT SAINT JOHN, FL 32927

CITY, STATE & ZIP CODE

321-637-0553

DAYTIME PHONE NUMBER

NOTE: PLEASE PROVIDE THE ORIGINAL AND ONE COPY OF THE ARTICLES

### ARTICLES OF INCORPORATION

OF

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# BREVARD FIRST ASSISTANTS, INC.

We, the undersigned, being of full age, sui juris and citizens of the United States, hereby file these Articles for the purpose of becoming a corporation under the laws of the State of Florida, by and under the provisions of the statutes of the State of Florida, providing for the formation, liability, privileges and immunities of a corporation for profit.

### ARTICLE I

The name of this corporation shall be Brevard First Assistants, Inc.

## ARTICLE II

This corporation may engage in any activity or business permitted under the laws of the United States and of the State of Florida, but is primarily designed to engage in Surgical Assistance.

### ARTICLE III

The total authorized capital stock of this corporation shall be 1000 shares of common stock of par value of \$1.00 per share. Said stock shall be paid for in cash or property, labor or services at a just valuation to be fixed by the incorporator in the manner provided for by statutes, and the stock shall be issued in accordance with such valuation. The capital stock shall be Section 1244 stock.

### ARTICLE IV

The amount of capital with which this corporation shall begin business shall not be less than Five Hundred (\$500.00) Dollars.

ARTICLE V

The corporation shall have perpetual existence unless sooner dissolved according to law.

ARTICLE VI

The principal place of business and general office of this corporation shall be at 5190 Cinnamon Fern

Blvd., Port Saint John, FL 32927, but it may maintain offices and transact business at such other

places, either within or without the State of Florida, as the Board of Directors may from time to time

provide by resolution. The registered agent for the corporation shall be Kelli M. Strobel, whose

business office is located at 5190 Cinnamon Fern Blvd., which office is hereby designated as the

registered office of the corporation.

ARTICLE VII

The business of the corporation shall be conducted by a president, a vice-president, a secretary and

treasurer, and a board of directors not less than the minimum required by law, or more than five. All

stockholders shall possess voting power. Each member of the board of directors shall be elected at the

meeting of the shareholders and each of the above designated officers, shall be elected by the board of

directors and shall hold office until their successors are elected or appointed. The name and street

address of the first officers and directors of the corporation are:

President, Vice President Secretary, Treasurer

Kelli M. Strobel 5190 Cinnamon Fern Blvd. Port Saint John, Fl 32927

# ARTICLE VIII

The highest amount of indebtedness to which this corporation may at any time subject itself shall be unlimited.

# ARTICLE IX

The name and post office address of the incorporators of this corporation and the amount of stock subscribed for by them are as follows:

Kelli M. Strobel 5190 Cinnamon Fern Blvd. Port Saint John, FL 32927 100 shares

IN WITNESS THEREOF, I have hereunto set my hand and seal to the foregoing Articles of Incorporation, and acknowledged this instrument to be filed in the office of the Secretary of State, State of Florida, this 

Therefore, I have hereunto set my hand and seal to the foregoing Articles of Incorporation, and acknowledged this instrument to be filed in the office of the Secretary of State, State of Florida, this 

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Kelli M. Strobel

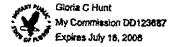
# STATE OF FLORIDA COUNTY OF BREVARD

I HEREBY CERTIFY that on this day, before me, an officer duly authorized to take oaths and acknowledgements, personally appeared **Kelli M. Strobel**, personally known to me to be the person described in and who acknowledged before me that they executed the same for the purposes therein-expressed.

WITNESS my hand and official seal in the county and state last aforesaid this  $\frac{2711}{100}$  day of  $\frac{1}{100}$  day.

Notary Public

Notary Name Printed



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TALLAHASSEE FLORIDA

CERTIFICATE DESIGNATING PLACE OF BUSINESS OF DOMICILE FOR THE SERVICE OF PROCESS WITHIN THIS STATE, AND NAMING AGENT UPON WHOM SERVICE MAY BE SERVED

In pursuance of Section 48.091, Florida Statutes, the following is submitted in compliance with said Act:

Brevard First Assistants, Inc. desiring to organize under the laws of the State of Florida with its principal office as indicated in the Articles of Incorporation, in Port Saint John, County of Brevard, State of Florida, has named Kelli M. Strobel, located at 5190 Cinnamon Fern Blvd., Port Saint John, Florida, as its agent to accept service of process within this state. Having been named to accept service of process for the above-stated corporation, at the place designated in this certificate, I hereby accept to act in this capacity, and agree to comply with the provisions of said Act relative to keeping open said office.

DATED this 37 day of February, 2004.