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TRANSMITTAL LETTER

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

SUBJECT: _	(proposed corporate name)	
Enclosed plea above corpora	se find an original and one (1) copy of the ation and check in the amount of $$78.79$	ne articles of incorporation for the
FROM:	Laura Alexis Brannon	•
•	Name 2422 Bent Tree Road #2711 Address	
	Palm Harbor, FL., 34683 City, State, & Zip	
	(727) 641-5398 Telephone Number	

Note: Additional copy of articles is needed only when certified copy is requested.

ARTICLES OF INCORPORATION

<u>OF</u>

SECRETARY OF STATE DIVISION OF CORPORATIONS 04 MAR 19 PM 4: 34

ALEXIS ANESTHESIA, P.A.

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE | NAME

The name of the corporation shall be:

Alexis Anesthesia, P.A.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

2422 Eent Tree Road #2711 Palm Harbor, FL., 34683

ARTICLE III CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

500 shares @ \$1.00 per share.

ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:

Laura Alexis Brannan 2422 Bent Tree Road #2711 Palm Harbor, FL., 34683

ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

Laura Alexis Brannon 2422 Bent Tree Road #2711 Palm Harbor, FL., 34683

ARTICLE VI NATURE OF BUSINESS

The nature of business of the Professional Association shall be: Provider of Anesthesia Services.

This filing is' in accordance with Florida Statues, Chapter 621.

The und	lersigned h	as(have) ex	recuted these Articles of Inco	prporation this
	8th	day of	March ,	20_04
			Lun abrains	President
			Signature/	itle
			Signature/	Title
			Signature/	Litle

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section 607.0501, Florida Statutes, the undersigned corporation, organized under the laws of the tate of Florida, submits the following statement in designating the registered office/registered agent, in the state of Florida.

2. The name and address of the registered agent and office is: Laura Alexis Brannon (NAME) 2422 Bent Tree Road #2711 (P.O. BOX NOT ACCEPTABLE) Palm Harbor, FL., 34683 (CITY/STATE/ZIP) SIGNATURE (Corporate officer) TITLE President DATE DATE DATE AS O \$ 0 \$ 1 HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT. SIGNATURE THE ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT. SIGNATURE THE ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.	1.	The name of the corporation is: A	lexis A	nesthes	ia,	P.A.	· · · · · · · · · · · · · · · · · · ·	·		
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REGISTERED AGENT FILING FEE: \$35,00