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To:

Division of Corporations
Fax Number : (850)205-0381

From:

Account Name : FAS-T CORP. AGENTS, INC.
Account Number : 071001002335
Phone : (305)599-0839
Fax Number : (305)716-0346

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FLORIDA PROFIT CORPORATION OR P.A.**SPINAL ASSOCIATES OF FLORIDA, INC.**

Certificate of Status	0
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**ARTICLES OF INCORPORATION
OF
SPINAL ASSOCIATES OF FLORIDA, INC.**

The undersigned Incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I

NAME: The name of the corporation is:

SPINAL ASSOCIATES OF FLORIDA, INC.

ARTICLE II

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

1625 Tioga Trail
Winter Park, Florida 32789

ARTICLE III

SHARES: The number of shares of stock that this corporation is authorized to have outstanding at any one time is One Hundred (100) shares.

ARTICLE IV

INITIAL REGISTERED AGENT AND STREET ADDRESS: The name and address of the initial registered agent is:

PHILIP BROWN
1625 Tioga Trail
Winter Park, Florida 32789

ARTICLE V

INCORPORATORS: The name and street address of the incorporator to these
Articles of Incorporation is:

PHILIP BROWN
1625 Tioga Trail
Winter Park, Florida 32789

The undersigned incorporators have executed these Articles of Incorporation this
22nd day of April, 2004.



PHILIP BROWN

**CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of Sections 607.0501 or 617.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. The name of the corporation is:

SPINAL ASSOCIATES OF FLORIDA, INC.

2. The name and address of the registered agent and office is:

**PHILIP BROWN
1625 Tioga Trail
Winter Park, Florida 32789**

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.


PHILIP BROWN

Date: April 22, 2004

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04 APR 27 2004