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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

FLORIDA PROFIT CORPORATION OR P.A.

DAHLIA ANN BLAKE, M.D., P.A.

Certificate of Status	0
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TS 8/6/04



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

August 6, 2004

FAS-T CORP. AGENTS, INC.

SUBJECT: DAHLIA ANN BLAKE, M.D., P.A.
REF: W04000030005

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The name on the cover sheet is different from the name in the articles of incorporation, please correct.

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Claretha Golden
Document Specialist
New Filings Section

FAX Aud. #: H040000161511
Letter Number: 304A00049020

ARTICLES OF INCORPORATION
OF

DAHLIA ANN BLAKE, M.D., P.A.

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

ARTICLE I NAME

The name of the corporation shall be: DAHLIA ANN BLAKE, M.D., P.A.

The principal place of business of this corporation shall be: 9707 WYETH CT., WELLINGTON, FL 33414

ARTICLE II NATURE OF BUSINESS

This corporation may engage in or transact any or all lawful activities or business permitted under the laws of the United States, the State of Florida, or any other state, country, territory or nation. IT WILL BE A PHYSICIANS OFFICE HAVING A LICENSED MEDICAL PRACTICE.

ARTICLE III CAPITAL STOCK

The aggregate number of shares of stock and its value that this corporation is authorized to have outstanding at any one time is: 500 SHARES OF \$ 1.00 EACH.

ARTICLE IV TERM OF EXISTENCE

This corporation is to exist perpetually.

ARTICLE V OFFICERS DIRECTORS

The name(s) and street address(es) of the initial officer(s) and director(s), if any, who shall hold office the first year of the corporation's existence or until their successor(s) is(are) elected, is(are):

DAHLIA ANN BLAKE M.D. 9707 WYETH CT., WELLINGTON, FL 33414

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE VI INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to this articles of incorporation is(are):

DAHLIA ANN BLAKE, M.D. 9707 WYETH CT., WELLINGTON, FL 33414

IN WITNESS WHEREOF, the undersigned Incorporator(s) has (have) executed these Articles of Incorporation this, 5th day of August, 2004

Signature(s) of Incorporator(s)



CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 607.325, 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:

DAHLIA ANN BLAKE, M.D., P.A.

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

DAHLIA ANN BLAKE, M.D. 9707 WYETH CT.

(P.O. BOX NOT ACCEPTABLE)

WELLINGTON, FLORIDA 33414

(CITY/STATE/ZIP)

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TALLAHASSEE, FLORIDA

SIGNATURE *DA A BL*

TITLE INCORPORATOR

DATE Aug 5, 2007

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325, FLORIDA STATUTES.

SIGNATURE *DA A BL*

DATE Aug 5, 2007