

P04000162834

(Requestor's Name)

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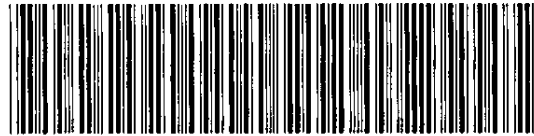
(Business Entity Name)

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09 AUG 14 AM 10:26
DEPT. OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FILED
09 AUG 14 PM 4:26
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Amend & Rest.
C.COULLIETTE

AUG 18 2009

EXAMINER



UCC FILING & SEARCH SERVICES, INC.
1574 Village Square Blvd Ste 100
Tallahassee, Florida 32309
(850) 681-6528

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August 14, 2009

CORPORATION NAME (S) AND DOCUMENT NUMBER (S):

Institute of Cosmoplastic Surgery, Inc.

Filing Evidence

☒ Plain/Confirmation Copy

☐ Certified Copy

Retrieval Request

☐ Photocopy

☐ Certified Copy

Type of Document

☐ Certificate of Status

☐ Certificate of Good Standing

☐ Articles Only

☐ All Charter Documents to Include
Articles & Amendments

☐ Fictitious Name Certificate

☐ Other

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	Non Profit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input checked="" type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of RA Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Reports
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation
<input type="checkbox"/>	Reinstatement

REGISTRATION/QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 14, 2009

UCC FILING & SEARCH SERVICES

TALLAHASSEE, FL

SUBJECT: INSTITUTE OF COSMOPLASTIC SURGERY, INC.
Ref. Number: P04000162834

RESUBMISSION
PLEASE HONOR ORIGINAL
DATE OF SUBMISSION
AS FILE DATE

8/14

We have received your document for INSTITUTE OF COSMOPLASTIC SURGERY, INC. and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The date of adoption/authorization of this document must be a date on or prior to submitting the document to this office, and this date must be specifically stated in the document. If you wish to have a future effective date, you must include the date of adoption/authorization and the effective date. The date of adoption/authorization is the date the document was approved.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6903.

Cheryl Coulliette
Regulatory Specialist II

Letter Number: 609A00027730

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DIVISION OF CORPORATIONS
2009 AUG 17 PM 4: 03
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TO ACKNOWLEDGE
SUFFICIENCY OF FILING

AMENDED AND RESTATED ARTICLES OF INCORPORATION
OF
INSTITUTE OF COSMOPLASTIC SURGERY, INC.

The Articles of Correction filed December 10, 2004 and Articles of Amendment to the Articles of Incorporation of INSTITUTE OF COSMOPLASTIC SURGERY, INC., a Florida corporation (the "Corporation") filed March 22, 2005 and April 6, 2009 with the Florida Department of State contained incorrect information that did not accurately reflect the ownership of the Corporation. In order to correct such inaccurate information and to otherwise amend its Articles of Incorporation, in their entirety, the Corporation hereby adopts the following Amended and Restated Articles of Incorporation:

ARTICLE I.
NAME

The name of this corporation is INSTITUTE OF COSMOPLASTIC SURGERY, INC.

ARTICLE II.
PRINCIPAL OFFICE

The principal office of this corporation and the mailing address of this corporation is 3226 West Kennedy Boulevard, Tampa, Florida 33609.

ARTICLE III.
DURATION

This corporation shall exist perpetually.

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SECRETARY
TALLAHASSEE
FLORIDA

ARTICLE IV.

PURPOSES

This corporation may engage in any activity or business permitted under the laws of the United States of America and of this State.

ARTICLE V.

CAPITAL STOCK

This corporation is authorized to issue One Hundred (100) shares of no par value stock.

ARTICLE VI.

REGISTERED OFFICE AND REGISTERED AGENT

The name of the Registered Agent of this corporation and the street address of the Registered Office are Christina Paylan, M.D., 3226 West Kennedy Boulevard, Tampa, Florida 33609.

ARTICLE VII.

BOARD OF DIRECTORS

This corporation shall have one (1) director. The number of directors may be either increased or decreased from time to time as provided in the Bylaws, but shall never be less than one (1). The name and address of the director of this corporation are Christina Paylan, 3226 West Kennedy Boulevard, Tampa, Florida 33609.

ARTICLE VIII.

AMENDMENT

This corporation reserves the right to amend or repeal any provisions contained in these Articles of Incorporation, or any amendment hereto, and any right conferred upon the shareholders is subject to this reservation.

ARTICLE IX.

BYLAWS

The Bylaws shall be adopted by the Board of Directors. The power to alter, amend, or repeal the Bylaws or adopt new Bylaws is vested in the Board of Directors, subject to repeal or change by action of the shareholders.

These Amended and Restated Articles of Incorporation have been adopted by unanimous written action of the sole shareholder and

sole Member of the Board of Directors of the Corporation which vote is sufficient to approve these Amended and Restated Articles of Incorporation pursuant to Sections 607.1003 and 607.1006, Florida Statutes by Written Action dated August 12, 2009.

IN WITNESS WHEREOF, the undersigned executes these Amended and Restated Articles of Incorporation on behalf of the Corporation this 12th day of August, 2009.

INSTITUTE OF COSMOPLASTIC SURGERY, INC.

By: 
Christina Paylan, President

ACCEPTANCE OF APPOINTMENT OF REGISTERED AGENT
ACKNOWLEDGMENT OF REGISTERED AGENT

Pursuant to Section 607.0501, Florida Statutes, I agree to act in the capacity of Registered Agent for the above corporation and will comply with the provisions of all statutes relative to the proper and complete performance of my duties. I am familiar with and accept the obligations of 607.0505, Florida Statutes.

Dated this 12th day of August, 2009.


Christina Paylan