

PO5000030589

(Requestor's Name)

(Address)

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(Business Entity Name)

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CLERK OF STATE
TALLAHASSEE FLORIDA

3/01/05

TRANSMITTAL LETTER

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

FILED
2005 FEB 21 PM 1:55
SECRETARY OF STATE
TALLAHASSEE FLORIDA

SUBJECT: EMINGER ASSOCIATES, 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 ☒ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: ROBERT EMINGER
Name (Printed or typed)

307 S.W. 27TH TERRACE
Address

DELRAY BEACH, FL 33445
City, State & Zip

724-962-1005
Daytime Telephone number

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

EMINGER ASSOCIATES, INC.

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

307 S.W. 27TH TERRACE
DELRAY BEACH, FL 33445

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TO PROVIDE ANESTHESIA RELATED SERVICES
TO THE MEDICAL COMMUNITY.

ARTICLE IV SHARES

The number of shares of stock is:

100 (COMMON)

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

ROBERT EMINGER, PRESIDENT
307 S.W. 27TH TERRACE
DELRAY BEACH, FL 33445

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

ROBERT EMINGER
307 S.W. 27TH TERRACE
DELRAY BEACH, FL 33445

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

ROBERT EMINGER
307 S.W. 27TH TERRACE
DELRAY BEACH, FL 33445

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Robert Eminger

Signature/Registered Agent
ROBERT EMINGER

2-17-05

Date

Robert Eminger

Signature/Incorporator
ROBERT EMINGER

2-17-05

Date