

PD5000049588

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

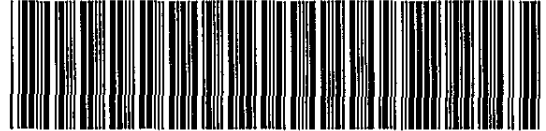
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2005 APR - 1 P 1:26
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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05 APR - 1 APR 11:05

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Stephanie Swope, M.D., P.A.

Signature

Requested by:

Name

Date

Time

Walk-In

Will Pick Up

- ☒ Art of Inc. File
- ☐ LTD Partnership File
- ☐ Foreign Corp. File
- ☐ L.C. File
- ☐ Fictitious Name File
- ☐ Trade/Service Mark
- ☐ Merger File
- ☐ Art. of Amend. File
- ☐ RA Resignation
- ☐ Dissolution / Withdrawal
- ☐ Annual Report / Reinstatement
- ☒ Cert. Copy
- ☐ Photo Copy
- ☒ Certificate of Good Standing
- ☐ Certificate of Status
- ☐ Certificate of Fictitious Name
- ☐ Corp Record Search
- ☐ Officer Search
- ☐ Fictitious Search
- ☐ Fictitious Owner Search
- ☐ Vehicle Search
- ☐ Driving Record
- ☐ UCC 1 or 3 File
- ☐ UCC 11 Search
- ☐ UCC 11 Retrieval
- ☐ Courier

ARTICLES OF INCORPORATION

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OF

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STEPHANIE SWOPE M.D., P.A.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I

The name of the Corporation is STEPHANIE SWOPE M.D., P.A. The address for the principal office and the mailing address of this Corporation shall be 2673 Danielle Drive, Oviedo, Florida 32765.

ARTICLE II

This Corporation shall have perpetual existence commencing on the filing of these Articles.

ARTICLE III

This Corporation may engage or transact in 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.

ARTICLE IV

This Corporation is authorized to issue 100 shares of \$1.00 par value common stock.

ARTICLE V

The Registered Agent and the street address of the initial registered office of this Corporation in the State of Florida shall be Thomas Peppler, Esq., 1420 Alafaya Trail, Suite 101, Oviedo, Florida 32765. The Board of Directors from time to time may move the Registered Office to any address in the State of Florida.

ARTICLE VI

This Corporation shall have one (1) Director initially. The number of Directors may be either increased or diminished from time to time by the By-Laws, but shall never be less than one (1). The name and address of the initial Director of this Corporation is Stephanie Swope M.D., 2673 Danielle Drive, Oviedo, Florida 32765. The name and address of the initial Officers of this Corporation are Stephanie Swope M.D, President, Treasurer and Secretary, 2673 Danielle Drive, Oviedo, Florida 32765.

ARTICLE VII

The name and address of the person signing these Articles of Incorporation as the Incorporator is Thomas Peppler, Esq., 1420 Alafaya Trail, Suite 101, Oviedo, Florida 32765.

ARTICLE VIII

The following additional provisions for the regulation of the business and for the conduct of the affairs of the Corporation and creating, dividing, limiting and regulating the powers of the Corporation, its Shareholders and Directors, are hereby adopted as a part of these Articles of Incorporation, to-wit:

A. The Board of Directors from time to time shall determine whether and to what extent, and at which time and place, and under what conditions and regulations, the accounts and books of the Corporation, or any of them, shall be open to the inspection of the Shareholders, and no Shareholder shall have any right to inspect any account or document of the Corporation, except as conferred by a statute or authorized by the Board of Directors, or by resolution of the Shareholders.

B. No person shall be required to own, hold or control stock in the Corporation as a condition precedent to holding an office in this Corporation.

C. The Directors may prescribe a method or methods for replacement of lost certificates and prescribe reasonable conditions by way of security for the issue of new certificates therefor.

D. No contract or other transaction between the Corporation and any other corporation, in the absence of fraud, shall be affected or invalidated by the fact that any one or more of the Directors of the Corporation is or are interested in, or is a Director or Officer, or are Directors or Officers of such other corporation, and any Director or Directors, individually or jointly, may be a party or parties to, or may be interested in, any such contract or transaction of the Corporation, or in which the Corporation is interested, and each and every person who may become a Director of the Corporation is hereby relieved from any liability that might otherwise exist from his contracting with the Corporation for the benefit of himself or any firm, association or corporation in which he may be in anywise interested. Any Director of the Corporation(s) may vote upon any contract or other transaction between the Corporation and any subsidiary or controlled company without regard to the fact that he also is a Director of such subsidiary or controlled company.

E. The Corporation shall indemnify any Officer(s) or Director(s), or any former Officer(s) or Director(s), to the full extent permitted by law.

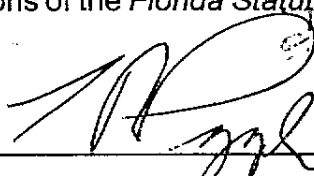
ARTICLE IX

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

ARTICLE X

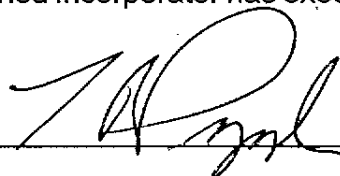
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Having been named to accept Service of Process for the above ^{2005 APR 1 26} stated Corporation, at the place designated in these Articles of Incorporation, I hereby accept to act in this capacity and agree to comply with the provisions of the *Florida Statutes* relative to keeping open said office. ^{SEAL} TALLAHASSEE, FLORIDA



Thomas Peppler, Registered Agent

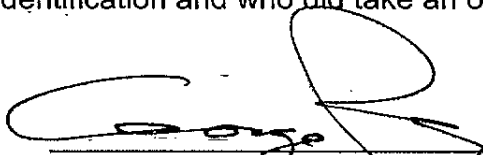
IN WITNESS WHEREOF, the undersigned Incorporator has executed these Articles of Incorporation this 29th day of March, 2005.



Thomas Peppler, Incorporator

STATE OF FLORIDA
COUNTY OF SEMINOLE

The foregoing instrument was acknowledged before me this 29th day of March, 2005 by Thomas Peppler, who is ☒ personally known to me or ☐ who has produced _____ as identification and who did take an oath.



Notary Public, State of Florida

Print Name: GEORGE PEREZ

Commission No. DD201670

My Commission Expires: 4-9-2007
(Seal)



George Perez
My Commission DD201670
Expires April 09, 2007