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05 MAY 2005 001 \*\*70.00

FLORIDA STATE  
TALLAHASSEE, FLORIDA

05 MAY -2 AM 8:51

RECEIVED

5/3/05  
BWK

W05-20262

**F A X**

•  
• **Noviello Anesthesia, P.A.**  
• 517 38th Street  
• West Palm Beach FL 33407-4101  
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**To:** Bruce W. Kitchens  
**Fax number:** 1-850-245-6804

**From:** John R. Noviello  
**Fax number:** 561-863-8721  
**Business phone:** 561-543-7317  
**Home phone:** 561-863-8721

**Date & Time:** 5/3/2005 8:51:08 AM  
**Pages:** 5  
**Re:** Noviello Anesthesia PA

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Bruce,

Here are the Articles of Incorporation with the corrections you've requested. Please call me at home if there are any questions at 561-863-8721.

Please FAX the approved document to Henry Dean, CPA at 561-274-2101.

Thanks,

JRN

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FLORIDA DEPARTMENT OF STATE

Glenda E. Hood  
Secretary of State

April 21, 2005

JOHN NOVELLO  
517 38TH STREET  
WEST PALM BEACH, FL 33407

SUBJECT: NOVELLO ANESTHESIA, P.A.  
Ref. Number: W05000020262

We have received your document for NOVELLO ANESTHESIA, P.A. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The specific nature of business of the professional association must be stated in the document.

Please return the original and one copy of 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) 245-6840.

Bruce W Kitchens  
Document Specialist  
New Filings Section

Letter Number: 105A00027509

ARTICLES OF INCORPORATION

OF

FILED

Novello Anesthesia, P.A.

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

05 MAY -2 AM 8:51

ARTICLE I NAME

The name of the corporation shall be:

Novello Anesthesia, P.A.

ARTICLE II PRINCIPAL OFFICE

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

517 38th Street  
West Palm Beach, FL 33407

ARTICLE III CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding  
at any one time is:

1,000

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Henry Dean, C.P.A.  
251 N.E. Dixie Blvd.  
Delray Beach, FL 33444

ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the Incorporator(s) to these Articles of Incorporation is(are):

John R. Noviello  
517 38th Street  
West Palm Beach, FL 33407-4101

ARTICLE VI

THE PURPOSE OF THE BUSINESS, NOVIELLO ANESTHESIA, P.A.,  
IS TO :

PROVIDE ANESTHESIA SERVICES.

The undersigned Incorporator(s) has(have) executed these Articles of Incorporation this

8th day of April, 2005

  
\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

Articles of Incorporation  
Filing Fee - \$35

**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: Noviello Anesthesia, P.A.

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

Henry Dean, C.P.A.

(NAME)

251 N.E. Dixie Blvd.

(P.O. BOX NOT ACCEPTABLE)

Delray Beach, FL 33444

(CITY/STATE/ZIP)

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.

SIGNATURE



DATE

4/8/05

REGISTERED AGENT FILING FEE: \$35.00