

P05000065374

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

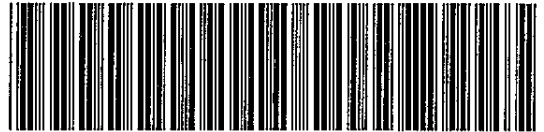
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

[Handwritten signature]
5/5/14



700052963097

05/02/05--01011--025 **87.50

FILED
05 MAY -2 AM 8:12
TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

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

SUBJECT: Diogenes F. Duarte, M.D., P.A.
(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 Filing Fee
 \$78.75 Filing Fee & Certificate of Status

\$78.75 Filing Fee & Certified Copy
 \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED

FROM: Diogenes F. Duarte, M.D.
Name (Printed or typed)

2258 N.W. 72nd Terrace
Address

Pembroke Pines, FL 33024
City, State & Zip

(954) 989-4929
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:

Diogenes F. Duarte, M.D., P.A.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

334 S.W. Commerce Drive, Suite 1
Lake City, FL 32055

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

the practice of medicine and all other
lawful purposes.

ARTICLE IV SHARES

The number of shares of stock is:

One thousand (1000) shares at one (\$1.00) Dollar par value each

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Diogenes F. Duarte, M.D. 2258 NW 72 Terrace Pembroke Pines, FL 33024 (D, P)
Theresa A. Duarte, 2258 NW 72 Terrace, Pembroke Pines, FL 33024 (D, V-P, S, T)

ARTICLE VI REGISTERED AGENT

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

Theresa A. Duarte
2258 NW 72 Terrace
Pembroke Pines, FL 33024

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Diogenes F. Duarte, M.D.
2258 NW 72 Terrace
Pembroke Pines, FL 33024

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

Theresa A. Duarte

Signature/Registered Agent

4/28/05

Date

DL

Signature/Incorporator

4/28/05

Date

FILED
05 MAY -2 AM 8:12
CLERK OF STATE
TALLAHASSEE, FLORIDA