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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

cr. 1-25

COVER LETTER

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

SUBJECT: Florida Neurology Consulting, 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 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: Gregory V. Hollstrom, II
Name (Printed or typed)

11444 Seminole Boulevard
Address

Largo FL 33778
City, State & Zip

727-393-6100
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: Florida Neurology Consulting, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 11444 Seminole Boulevard
Largo FL 33778

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: to engage in any activities or business permitted under the Laws of the United States and the laws of the State of Florida.

ARTICLE IV SHARES

The number of shares of stock is: (7,500), all of one class, at a par value of one dollar ($1.00) per share.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s): The corporation shall have (1) directors initially. The number of directors may increased or diminished from time to time, by amendment to the By-Laws, but shall never be less than one (1). The names and street addresses of the members of the first Board of Directors are: Gregory V. Hollstrom, II / 11444 Seminole Boul Largo FL 33778

ARTICLE VI REGISTERED AGENT

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

~~N/A~~ Gregory V. Hollstrom, II
11444 Seminole Boulevard
Largo FL 33778

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Gregory V. Hollstrom II
11444 Seminole Boulevard
Largo FL 33778

Article VIII - An Effective Date

An effective date shall be 01/16/06

****

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

~~N/A~~ _____
Signature/Registered Agent

01/16/06
Date

_____
Signature/Incorporator

01/16/06
Date

Dr. Gregory V. Hollstrom II

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