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06 JUN 14 PM 1:19  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

Subject: TrueBlue Anesthesia, P.A.

Enclosed please find an original and one (1) copy of the articles of incorporation for the above corporation and check in the amount of \$70.00.

Please forward a certified copy to the address listed below.

From: KAREN BRAFFORD  
4900 62<sup>ND</sup> AVENUE SOUTH  
ST. PETERSBURG, FLORIDA 33715

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ARTICLES OF INCORPORATION  
OF

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

TrueBlue Anesthesia, P.A.

The undersigned incorporators, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt the following Articles of Incorporation.

ARTICLE I: NAME

The name of the corporation shall be:

TrueBlue Anesthesia, P.A.

ARTICLE II: PRINCIPAL OFFICE

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

4900 62<sup>ND</sup> AVENUE SOUTH  
ST. PETERSBURG, FLORIDA 33715

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 Shares at \$ 1.00 dollar par value

ARTICLE IV: INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:

KAREN BRAFFORD  
4900 62<sup>ND</sup> AVENUE SOUTH  
ST. PETERSBURG, FLORIDA 33715

ARTICLE V: INCORPORATOR (S)

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

KAREN BRAFFORD  
4900 62<sup>ND</sup> AVENUE SOUTH  
ST. PETERSBURG, FLORIDA 33715

The undersigned has executed these Articles of Incorporation this 12 day of  
June 2006.

Karen S. Brafford  
KAREN BRAFFORD

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CERTIFICATE OF DESIGNATION  
REGISTERED AGENT / REGISTERED OFFICE

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Pursuant to the provisions of section 607.0501, 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:

TrueBlue Anesthesia, P.A.

2. The name and address of registered agent and officer is:

KAREN BRAFFORD  
4900 62<sup>ND</sup> AVENUE SOUTH  
ST. PETERSBURG, FLORIDA 33715

Signature Karen Brattford  
Title \_\_\_\_\_  
Date 6/12/06

HAVING BEEN NAMED AS REGISTERD 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 Karen S. Brattford  
Date 6/12/06