

P07000015640

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

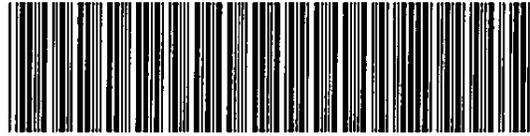
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2007-01-29

Tel 941-383-9799
Fax 815-927-0480

WILLIAM ONEIL
email bill711@comcast.net

520 Harbor Gate Way
Longboat Key, FL 34228-3502

January 25, 2007

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

Re: LUCIEN MEDICAL P.A.

Gentlemen,

Enclosed please find Articles of Incorporation on a new Florida corporation, LUCIEN MEDICAL P.A. by name, along with my check for \$70.00 consisting of \$35.00 for the filing fee and \$35.00 for the registered agents fee, and a stamped, self-addressed envelope to accommodate your reply.

Very Truly Yours,

WOneil

William Oneil
Attorney for LUCIEN MEDICAL P.A.



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 30, 2007

WILLIAM ONEIL, ATTORNEY
520 HARBOR GATE WAY
LONGBOAT KEY, FL 34228-3502

SUBJECT: LUCIEN MEDICAL P.A.
Ref. Number: W07000004990

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

07 FEB -5 AM 11: 50

RECEIVED

We have received your document for LUCIEN MEDICAL 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 business purpose 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) 245-6855.

Tammy Hampton
Document Specialist
New Filing Section

Letter Number: 407A00007218

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2007 FEB -5 AM 11:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION
OF
LUCIEN MEDICAL P.A.

ARTICLE I

The name of the corporation shall be LUCIEN MEDICAL P.A..

ARTICLE II

The street address and mailing address of the initial principal place of business is 8146 Bahia Blanca St, Jacksonville, Fl 32256.

ARTICLE III

The purpose for which the corporation is formed is the provision of medical services customarily provided by physicians licensed to perform medical doctor services under the laws of the State of Florida, in accordance with the Professional Service Corporation and Limited Liability Company Act, Chapter 621, Florida Statutes.

ARTICLE IV

The aggregate number of shares which the corporation shall have is five thousand (5,000) shares of common stock with TEN CENT (\$.10) par value per share.

ARTICLE V

The number of directors constituting the initial Board of Directors of the corporation is two (2). The names and addresses of the persons who will serve on the initial Board of Directors are:

Huber Matos
8146 Bahia Blanca St
Jacksonville, Fl 32256

Kirsten Matos
8146 Bahia Blanca St
Jacksonville, Fl 32256

ARTICLE VI

The street address of the initial registered agent, and the name of the corporation's initial registered agent at that address is:

William Oneil
520 Harbor Gate Way
Longboat Key, Fl 34228

ARTICLE VII

The name and address of the corporation's incorporator is:

William Oneil
520 Harbor Gate Way
Longboat Key, Fl 34228

IN WITNESS WHEREOF the undersigned incorporator has hereunto affixed his hand and seal this 25th day of January, 2007.


William Oneil

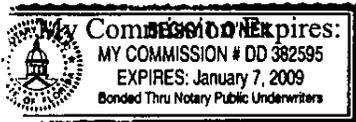
STATE OF FLORIDA

COUNTY OF SARASOTA

I HEREBY CERTIFY that on this day personally appeared William Oneil to me well known to be the person that executed the foregoing Articles of Incorporation, and he acknowledged before me that he executed the same for the purposes therein expressed.

Witness my hand and official seal in the County and State above named, this 25th day of January, 2007.


Notary Public
State of Florida at Large



CERTIFICATE OF REGISTERED AGENT

In compliance with Chapter 607.0501, Florida Statutes, the undersigned hereby accepts the designation as registered agent for LUCIEN MEDICAL P.A..

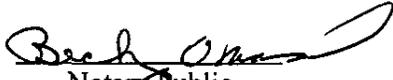
Dated this 25th day of January, 2007.


William Oneil

STATE OF FLORIDA

COUNTY OF SARASOTA

Sworn to and subscribed before me this 25th day of January, 2007, by William Oneil, who is personally known to me or who has produced _____ as identification.


Notary Public
State of Florida at Large

