

Division of Corporations

Page 1 of 1

Florida Department of State  
Division of Corporations  
Public Access System

## Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H08000128483 3)))



H08000128483ABC1

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations  
Fax Number : (850) 617-6381

From: Account Name : HUBCO  
Account Number : 104662003400  
Phone : (316) 935-3940  
Fax Number : (316) 935-3088

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2008 MAY 13 AM 11:43

FILED

## FLORIDA PROFIT/NON PROFIT CORPORATION

Anclote Surgical Inc.

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$78.75

DIVISION OF CORPORATION

08 MAY 13 PM 5:15

RECEIVED

Electronic Filing Menu

Corporate Filing Menu

Help

H08000128483

## ARTICLES OF INCORPORATION

*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.*

### ARTICLE I NAME

The name of the corporation shall be:

**Anclote Surgical Inc.**

### ARTICLE II PRINCIPAL OFFICE

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

**Anclote Surgical Inc.  
44 Central Court  
Tarpon Springs, FL 34689**

### ARTICLE III SHARES

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

**1,500 Shares at No Par Value**

### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

**Greg Paino  
44 Central Court  
Tarpon Springs, FL 34689**

**Prepared By:**

**Bruce B. Hubbard  
77 East John St.  
Hicksville, New York 11801  
1-516-835-3840**

FILED  
2008 MAY 13 AM 11:43  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

RECEIVED  
08 MAY 13 PM 5:15  
DIVISION OF CORPORATION

H08000128483

H08000128483

**ARTICLES V INITIAL OFFICER(S)/DIRECTOR(S)**

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

**Greg Paino - President/Director  
44 Central Court  
Tarpon Springs, FL 34689**

**ARTICLES VI INCORPORATOR(S)**

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

**Greg Paino  
44 Central Court  
Tarpon Springs, FL 34689**

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

21st day of April 2008.

  
\_\_\_\_\_  
Greg Paino - Signature

H08000128483

H08000128483

**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

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 THE DESIGNATING THE  
REGISTERED OFFICE/AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: **Anclote Surgical Inc.**

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

**Greg Paino**

Name

**44 Central Court**

(P.O. Box or Mail Drop Box NOT Acceptable)

**Tarpon Springs, FL 34689**

(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 the statutes relating to the proper and complete performance of my duties, and am familiar with and accept the obligations of my position as registered agent.*

  
Greg Paino  
SIGNATURE

**April 21, 2008**

(Date)

**FILED**  
**2008 MAY 13 AM 11:43**  
**SECRETARY OF STATE**  
**TALLAHASSEE, FLORIDA**

H08000128483