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CSH SERVICES

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**Florida Department of State  
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**To:**

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

**From:**

Account Name : CSH SERVICES, LLC  
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Phone : (800)494-3124  
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DIVISION OF CORPORATION

**FLORIDA PROFIT/NON PROFIT CORPORATION**

**ATLANTIC NEPHROLOGY, INC.**

Certificate of Status	0
Certified Copy	0
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*H-08000147907-3*

**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:

ATLANTIC NEPHROLOGY, INC.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailing address is:

5951 MARVILLE CIRCLE  
PORT ORANGE, FLORIDA 32127

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is to engage in any activity or business permitted under the laws of the State of Florida.

**ARTICLE IV SHARES**

The number of shares of stock is:

1,500 COMMON SHARES PAR VALUE \$0.01

**ARTICLE V INITIAL OFFICERS / DIRECTORS (optional)**

The name(s), address(es), and title(s) of the directors and officers is:

PRESIDENT

WILLIAM B. FERGUSON  
5951 MARVILLE CIRCLE  
PORT ORANGE, FLORIDA 32127

TREASURER

LINDA FERGUSON  
5951 MARVILLE CIRCLE  
PORT ORANGE, FLORIDA 32127

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PAGE 2 ATLANTIC NEPHROLOGY, INC.

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**ARTICLE VI REGISTERED AGENT**

The name and Florida street address of the registered agent is:

LINDA FERGUSON  
5951 MARVILLE CIRCLE  
PORT ORANGE, FLORIDA 32127

**ARTICLE VII INCORPORATOR**

The name and Florida street address of the incorporator is:

LINDA FERGUSON  
5951 MARVILLE CIRCLE  
PORT ORANGE, FLORIDA 32127

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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.

Linda Ferguson  
LINDA FERGUSON /Registered Agent

6/9/08  
Date

Linda I. Ferguson  
LINDA FERGUSON /Incorporator

6/9/08  
Date