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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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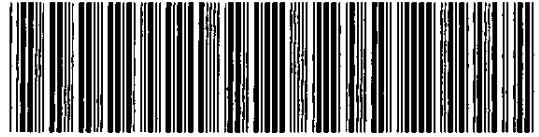
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2009 MAR 25 P 3:18

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COVER LETTER

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

SUBJECT: Robert Ford, MD, 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: Robert Ford, MD

Name (Printed or typed)

308 53rd Avenue East

Address

Bradenton, FL 34203

City, State & Zip

941-752-1916

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:

Robert Ford, MD, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:

The principal office and mailing address of the corporation shall initially be 308 53rd Avenue East, Bradenton, FL 34203.
The corporation may change its principal office and/or mailing address from time to time as permitted by law.

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

This Corporation is organized under Chapters 607 and 621 of the Florida Statutes, for the purpose of rendering specific professional services as a medical doctor.

ARTICLE IV SHARES

The number of shares of stock is:

This corporation is authorized to issue 1,000 shares of voting common stock with a par value of \$1.00 (One Dollar)

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

Robert E. Ford, MD, 2828 S. Tamiami Trail, Sarasota, FL 34239

This corporation shall have the previous mentioned directors initially. The number of directors may be either increased or decreased from time to time by the Bylaws, but shall never be less than one.

ARTICLE VI REGISTERED AGENT

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

Robert E. Ford, MD, 2828 S. Tamiami Trail, Sarasota, FL 34239

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Robert E. Ford, MD 2828 S. Tamiami Trail, Sarasota, FL 34239

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



Signature/Registered Agent



Signature/Incorporator

3/23/09

Date

3/23/09

Date