

709000032396

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

(Business Entity Name)

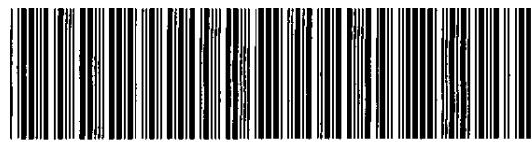
(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900149071269

04/09/09--01033--005 **70.00

2009 APR -9 PM 1:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

NUCKOLLS, JOHNSON, BELCHER & FERRANTE, P.A.

ATTORNEYS AND COUNSELORS AT LAW

THE TIDEWATER BUILDING

HUGH PAUL NUCKOLLS

KARL L. JOHNSON

W. GUS BELCHER, II

*CRAIG FERRANTE

*BOARD CERTIFIED IN
CIVIL TRIAL PRACTICE

MAILING ADDRESS:

P. O. DRAWER 2199

FORT MYERS, FLORIDA 33902-2199

SUITE 303

1875 JACKSON STREET

FORT MYERS, FLORIDA 33901

(239) 334-3400

April 1 , 2009

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

Re: Incorporation of
Robert B. Maggiano, D.O., ABFP-C, P.A.

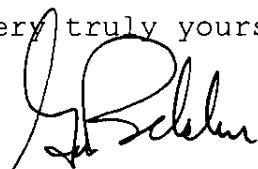
Gentlemen:

Enclosed please find the original and two copies of the Articles of Incorporation for Robert B. Maggiano, D.O., ABFP-C, P.A. for filing. Also enclosed is my check payable to Florida Department of State in the amount of \$70.00 to cover the \$35.00 filing fee and \$35.00 Registered Agent Fee. I do not desire a certified copy of the Articles.

After the Articles have been filed, please return to me a copy stamped with the date of filing on same. I have enclosed a self-addressed, stamped envelope for your convenience.

If you should have any questions, please do not hesitate to contact me.

Very truly yours,



W. GUS BELCHER, II

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2009 APR -9 PM 1:12

FILED

WGB/cl

Enclosures: as stated

K09.1e:Maggiano.L1

ARTICLES OF INCORPORATION

OF

ROBERT B. MAGGIANO, D.O., ABFP-C, P.A.

In compliance with Chapter 607 and/or Chapter 621,
F.S. Profit,

ARTICLE I

NAME

The name of the corporation shall be ROBERT B.
MAGGIANO, D.O., ABFP-C, P.A.

2009 APR -9 PM 1:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

ARTICLE II

PRINCIPAL OFFICE

The principal street address and mailing address are:
6314 Whiskey Creek Drive, Suite A, Fort Myers, Florida 33919.

ARTICLE III

PURPOSE

This corporation is organized for the following purposes:

- a) To engage in the practice of medicine as a professional corporation and to own and operate a medical office for the purposes of providing medical care and treatment.
- b) To do everything necessary, proper, or convenient to accomplish any of the purposes set forth in these Articles,

and to do every other act incidental to the corporate purposes which is not forbidden by Florida laws or by the provisions of these Articles of Incorporation.

The purposes of this corporation shall be carried out only through officers, employees, and agents, each of whom is licensed or otherwise legally qualified to render professional medical services in the State of Florida.

ARTICLE IV

SHARES

The number of shares of stock that this corporation is authorized to have is 100 shares.

ARTICLE V

INITIAL OFFICERS AND DIRECTORS

The name and address of the initial Director and President of this corporation is:

Robert B. Maggiano, D.O.
6314 Whiskey Creek Drive, Suite A
Fort Myers, Florida 33919

ARTICLE VI

REGISTERED AGENT

The name and Florida street address of the Registered Agent is:

W. Gus Belcher, II, Esquire
Nuckolls, Johnson, Belcher & Ferrante, P.A.
1375 Jackson Street, Suite 303
Fort Myers, Florida 33901

ARTICLE VII

INCORPORATOR

The name and address of the Incorporator is:

Robert B. Maggiano, D.O.
6314 Whiskey Creek Drive, Suite A
Fort Myers, Florida 33919

IN WITNESS WHEREOF, the undersigned Incorporator has set his hand and seal, and acknowledged and filed the foregoing Articles of Incorporation under the Laws of the State of Florida, this 31st day of March, 2009.



ROBERT B. MAGGIANO, D.O.
Incorporator

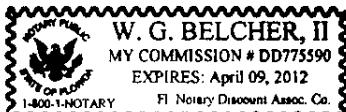
STATE OF FLORIDA)
)
COUNTY OF LEE)

BEFORE ME, the undersigned authority, authorized to administer oaths and take acknowledgments, this day personally appeared ROBERT B. MAGGIANO, D.O., who is personally known to me or who has produced as identification, and who did take an oath, and who has acknowledged before me that he has read and executed the foregoing instrument for the purposes therein expressed.

WITNESS my hand and official seal this 31st day of March, 2009.

My commission expires:

NOTARY PUBLIC
Name: W. G. Belcher II



**CERTIFICATE DESIGNATING PLACE OF BUSINESS
OR DOMICILE FOR THE SERVICE OF PROCESS
WITHIN THE STATE, NAMING AGENT UPON
WHOM PROCESS MAY BE SERVED**

Pursuant to Section 48.091, Florida Statutes, the following is submitted, in compliance with said Act;

FIRST -- that ROBERT B. MAGGIANO, D.O., ABFP-C, P.A. desiring to organize under the Laws of the State of Florida, with its principal office as indicated in the Articles of Incorporation, in the City of Fort Myers, County of Lee, State of Florida, has named W. GUS BELCHER, II, Esquire, located at 1375 Jackson Street, Suite 303, Fort Myers, Florida 33901, as its Registered Agent to accept service of process within the State.

ACKNOWLEDGMENT -- having been named to accept service of process for the above stated Corporation, at the place designated in this Certificate, I hereby accept to act in this capacity, and agree to comply with the provisions of said Act relative to keeping open said office.

DATED this 31st day of March, 2009.


W. GUS BELCHER, II, Esquire
Registered Agent

2009 APR -9 PM 1:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED