

Florida Department of State

Division of Corporations Public Access System

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Division of Corporations

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FLORIDA PROFIT/NON PROFIT CORPORATION

Southwest Medical Services PA

Certificate of Status	1
Certified Copy	0
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ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, herby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

Southwest Medical Services PA

ARTICLE II PRINCIPAL OFFICE

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

Southwest Medical Services PA 15616 Alton Drive Fort Myers, FL 33908

ARTICLE III SHARES

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

200 SHARES at No Par Value

ARTICLE IV PURPOSE

The purpose for which this corporation is/are formed, are as follows:

To practice the profession of: Medicine

Prepared By: Bruce B. Hubbard 77 East John St. Hicksville, New York 11801 1-516-935-3940

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ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS

. The name and address of the initial registered agent is:

Viswanathan Nagarajan 15616 Alton Drive Fort Myers, FL 33908

ARTICLES VI INITIAL OFFICER(S)/DIRECTOR(S)

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

Viswanathan Nagarajan - President/Director 15616 Alton Drive Fort Myers, FL 33908

ARTICLES VII INCORPORATOR(S)

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

Viswanathan Nagarajan 15616 Alton Drive Fort Myers, FL 33908

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

_____19th _ day of _ October _____ 2009.

Viswanathan Nagarajan

SIGNATURE

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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:	Southwest Medical Services PA
2. The name and address of the registe	ered agent and office is:
·	Viswanathan Nagarajan
	Name
	15616 Alton Drive
	(P.O. Box or Mail Drop Box NOT Acceptable)
	Fort Myers, FT. 33908
	(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.

Viswanathan Nagarajan

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SIGNATURE

October 19, 2009

(Date)

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