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.

(((H10000011453 3)))



H100000114533AFICE

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 : JUDD, ULRICH ET EL

Account Number: I19980000022

Phone

: (941)955-5100

Fax Number

: (941)953-2485

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Address:								
	Address:							

FLORIDA PROFIT/NON PROFIT CORPORATION

SUNSHINE ANESTHESIA SERVICES, PA

 Certificate of Status
 0

 Certified Copy
 0

 Page Count
 02

 Estimated Charge
 \$70.00

SRECEIVED

NO JAN 26 PH 4: 19

SHOWN OF CORPORATIONS

SHOWN OF CORPORATIONS

STALLAMASSET, FLOPIDA

A1/27/18



January 20, 2010

FLORIDA DEPARTMENT OF STATE
Division of Corporations

JUDD, ULRICH ET EL

SUBJECT: SUNSHINE ANESTHESIA SERVICES, P.A.

REF: W10000002843

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

The document number of the name conflict is P08000048752 (SUNSHINE ANESTHESIA SERVICES P.A.).

If you have any further questions concerning your document, please call (850) 245-6928.

Tim Burch Regulatory Specialist II New Filing Section FAX Aud. #: H10000011453 Letter Number: 510A00001519

No. 8307 P. 3

ARTICLES OF INCORPORATION

OF

SUNSHINE ANESTHESIA OF SOUTHWEST FLORIDA, PA

The undersigned Incorporator subscribing to these Articles of Incorporation, being competent to contract, hereby forms a Corporation under the Laws of the State of Florida.

ARTICLE I

The name of this Corporation shall be: SUNSHINE ANESTHESIA OF SOUTHWEST FLORIDA, PA, and its initial mailing address shall be: PO Box 07207, Ft. Myers, FL 33919. The initial address of the Corporation's principal office shall be: 5050 Mason Corbin Court, Ft. Myers, FL 33907.

ARTICLE II

The purpose of this Corporation is to engage in the practice of anesthesiology within the State of Florida and to take all actions that are necessary or proper in connection with that practice.

This Corporation shall have all powers given professional service corporations under the Laws of the State of Florida.

ARTICLE III

The maximum number of shares of stock that this Corporation is authorized to have outstanding at any one time shall be 1,000 shares of common stock having a par value of \$1.00.

Prepared By:
John E. Wickman, Esq.
Judd, Ulrich, Scarlett, Wickman & Dean, P.A.
2940 South Tamiami Trail
Sarasota, FL 34239
(941) 955-5100
Florida Bar No. 0046884

Fax Audit No.: H10000011453 3

ARTICLE IV

This Corporation is to exist perpetually.

ARTICLE V

The name of the initial Registered Agent is Judd, Ulrich, Scarlett, Wickman & Dean, P.A. The street address of the initial registered office of this Corporation is: 2940 South Tamiami Trail, Sarasota, FL 34239. The Board of Directors may from time to time move the registered office to any other address in Florida.

ARTICLE VI

The name and address of each Incorporator of this Corporation is: John E. Wickman, 2940 South Tamiami Trail, Sarasota, FL 34239.

ARTICLE VII

These Articles of Incorporation may be amended in the manner provided by law.

ARTICLE VIII

Pursuant to the provisions of Chapter 607, Florida Statutes, this Corporation shall begin in existence upon filing of these Articles of Incorporation with the Secretary of State.

(SEAL)

John E. Wickman, Incorporator

Having been named as registered agent and to accept service of process for above stated corporation at the place designated in this certificate, the undersigned hereby accepts the appointment as registered agent and agrees to act in this capacity. The undersigned further agrees to comply with the provisions of all statutes relating to the proper and complete performance of its duties, and is familiar with and accepts the obligations of its position as registered agent.

Judd, Ulrich, Scarlett, Wickman & Dean, P.A., a Florida professional corporation

John∕E. Wickman

Fax Audit No.: H10000011453 3