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Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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## To:

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

## From:

Account Name : C T CORPORATION SYSTEM  
Account Number : FCA000000023  
Phone : (850) 222-1092  
Fax Number : (850) 878-5368

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

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## FLORIDA PROFIT/NON PROFIT CORPORATION

HMA Lake Shore, Inc.

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$78.75

2010 JUN 22 AM 11:16  
SECRETARY OF STATE  
TALLAHASSEE, FL 32310

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10 JUN 22 AM 11:15  
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TALLAHASSEE, FL 32310

## COVER LETTER

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

**SUBJECT:** HMA Lake Shore, 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      ☐ \$78.75  
Filing Fee      Filing Fee  
                         & Certificate of Status

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input checked="" type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
<b>ADDITIONAL COPY REQUIRED</b>	

**FROM:** Timothy R. Parry

Name (Printed or typed)

5811 Pelican Bay Boulevard, Suite 500

Address

Naples, FL 34108

City, State & Zip

239-598-3131

Daytime Telephone number

peggy.oneil@hma.com

E-mail address: (to be used for future annual report notification)

**NOTE:** Please provide the original and one copy of the articles.

**ARTICLES OF INCORPORATION  
OF**

**HMA LAKE SHORE, INC.**

In compliance with Chapter 607, Florida Statutes

**ARTICLE I: NAME**

The name of the Corporation shall be HMA Lake Shore, Inc.

**ARTICLE II: PRINCIPAL OFFICE**

The principal street address and mailing address of the corporation is:

5811 Pelican Bay Blvd., Suite 500, Naples, Florida 34108

**ARTICLE III: PURPOSE**

The purpose for which the Corporation is formed is to engage in any lawful act or activity for which a corporation may be organized under the 2009 Florida Statutes.

**ARTICLE IV: SHARES**

The number of shares of stock is 10,000.

**ARTICLE V: REGISTERED AGENT**

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

CT Corporation System, 1200 South Pine Island Road, Plantation, Florida 33324

**ARTICLE VI: INCORPORATOR**

The name and address of the Incorporator is:

Timothy R. Parry, 5811 Pelican Bay Blvd., Suite 500, Naples, Florida 34108

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*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.*

CT Corporation System

By: *Alfred M. Walsh*  
Signature registered agent

*6/22/10*  
Date

*Robert R. Pany*  
Signature Incorporator

*6-18-10*  
Date

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