

**Electronic Articles of Incorporation
For**

P12000042841
FILED
May 08, 2012
Sec. Of State
jshivers

FAMILY PHYSICIAN ASSISTANT PA

The undersigned incorporator, for the purpose of forming a Florida profit corporation, hereby adopts the following Articles of Incorporation:

Article I

The name of the corporation is:

FAMILY PHYSICIAN ASSISTANT PA

Article II

The principal place of business address:

210 CAPRI COVE WEST
NICEVILLE, FL. US 32578

The mailing address of the corporation is:

210 CAPRI COVE WEST
NICEVILLE, FL. US 32578

Article III

The purpose for which this corporation is organized is:

PHYSICAN ASSISTANT

Article IV

The number of shares the corporation is authorized to issue is:

1000

Article V

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

GARY P BULLARD
210 CAPRI COVE WEST
NICEVILLE, FL. 32578

I certify that I am familiar with and accept the responsibilities of registered agent.

Registered Agent Signature: GARY P BULLARD

Article VI

The name and address of the incorporator is:

GARY P BULLARD
210 CAPRI COVE WEST

NICEVILLE, FL 32578-4410

Electronic Signature of Incorporator: GARY P BULLARD

I am the incorporator submitting these Articles of Incorporation and affirm that the facts stated herein are true. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of this corporation and every year thereafter to maintain "active" status.

Article VII

The initial officer(s) and/or director(s) of the corporation is/are:

Title: P
GARY P BULLARD
210 CAPRI COVE WEST
NICEVILLE, FL. 32578 US

Title: VP
BRENDA R BULLARD
210 CAPRI COVE WEST
NICEVILLE, FL. 32578 US