Florida Department of State

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FLORIDA PROFIT/NON PROFIT CORPORATION

Frank Tresgallo Medical Consulting P.A.

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$78.75

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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:

Frank Tresgallo Medical Consulting P.A.

ARTICLE II PRINCIPAL OFFICE

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

2029 E. Crown Pointe Boulevard Naples, FL 34112

ARTICLE III SHARES

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

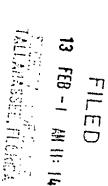
1,500 Shares at No Par Value

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
1-516-835-3940



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ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Frank Tresgatio 2029 E. Crown Pointe Boulevard Naples, FL 34112

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

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

Frank Tresgatio - President/Director 2029 E. Crown Pointe Boulevard Naples, FL 34112

ARTICLES VII INCORPORATOR(S)

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

Frank Tresgallo 2029 E. Crown Pointe Boulevard Naples, FL 34112

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

<u>28th</u> day of <u>January</u> 20_13

Frank Tresgallo 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.

2. The name and address of	the registered agent and office is:		ಪ	
	Frank Tresgallo		FEB	-11
	Name	65 T	1	سا
	2029 E. Crown Pointe Boulevard	in Fi	Ŧ	EO
	(P.O. Box or Mail Drop Pox NOT Apouplable)	 프라. 도로	=	
	Naples, FL 34112	S.,	=	
	(City / Suro / Zlp)	51 -	t-	

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this vertificate, 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.

Frank Tresgallo SIGNATURE 01/28/2013 (Date)

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