Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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.

(((H13000058722 3)))



H130000587223ABC

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 : ADVANCED INCORPORATING SERVICE,

Account Number : I20080000093 Phone : (850)222-2677 Fax Number : (850)575-2724

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

Email Address:

FLORIDA PROFIT/NON PROFIT CORPORATION Dr. Treat and Prevent Allergies, Asthma and Sinusit

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

Electronic Filing Menu

Corporate Filing Menu

Help

13 MAR 13 AM11: 06

- Charles Single Control of the Cont

3/13/2013



March 14, 2013

FLORIDA DEPARTMENT OF STATE

ADVANCED INCORPORATING SERVICE, Division of Corporations

SUBJECT: "DR. TREAT AND PREVENT ALLERGIES, ASTHMA AND SINUSITIS", P.A. REF: W13000015142

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 document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Pamela Smith Regulatory Specialist II FAX Aud. #: H13000058722

Letter Number: 213A00006069

ARTICLES OF INCORPORATION ECRETARY OF STATE FOR

"Dr. Treat and Prevent Allergies, Asthma and Sinusitis", P.A.

The undersigned incorporator, for the purpose of forming a Professional Association under the Florida Business Corporation Act, Chapter 607, hereby adopts the following Articles of Incorporation.

ARTICLE I: NAME

The name of the Professional Association is "Dr. Treat and Prevent Allergies, Asthma and Sinusitis", P.A. The specific nature of business of this Professional Association is Internal Medicine and Pediatric based medical care.

ARTICLE II: PRINCIPAL OFFICE

The principal office and mailing address of the Professional Association is 1605 19th Place, Vero Beach, FL 32960.

ARTICLE III: CAPITAL STOCK

The number of shares of stock that this Professional Association is authorized to have outstanding at any one time is one thousand (1,000) shares having a par value of \$1.00 per share. The sole shareholder is Robert Emerson Bowen, MD, having 100% of the total shares.

H13000058722 3

ARTICLE IV: DIRECTORS

The name and address of the initial Director of the Professional Association is Robert Emerson Bowen, MD, Director, 5047 N. Highway A1A, Apt. 1502, Fort Pierce, FL 34929.

ARTICLE V: REGISTERED AGENT AND ADDRESS

The name and address of the initial Registered Agent of the Professional Association is Robert Emerson Bowen, MD, 5047 N. Highway A1A, Apt. 1502, Fort Pierce, FL 34929.

ARTICLE VI: INCORPORATOR

The name and address of the incorporator of the Professional Association is Advanced Incorporating Service, Inc., 1317 California Street, Tallahassee, FL 32304.

The undersigned incorporator has executed these Articles of Incorporation this 13th day of March 2013.

"Advanced Incorporating Service, Inc. by, Weimar Lopez, Client

Representative"

H130000587223

CERTIFICATE DESIGNATING REGISTERED AGENT AND REGISTERED OFFICE

Pursuant to the provisions of section 607.0501, Florida Statutes, the aforementloned corporation, formed under the laws of the State of Florida, submits the following statement designating the Registered Agent and Registered Office, in the State of Florida.

Name of the corporation:

"Dr. Treat and Prevent Allergies, Asthma and Sinusitis", P.A.

Name and address of the Registered Agent and Registered Office:

Robert Emerson Bowen, MD

5047 N. Highway A1A, Apt. 1502, Fort Pierce, FL 34929

Having been named Registered Agent and to accept Service of Process for the aforementioned corporation at the designated place in this certificate, I hereby accept the appointment and agree to act in its capacity, I further agree, am familiar with and accept the obligations of my position as Registered Agent as provided for in Chapter 607, Florida Statutes.

13 HAR IS AM II: 06
SECRETARY OF STATE