

P13000093890

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.

((H13000254383 3)))



H13000254383ABC\$

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
2013 NOV 18 PM 1:25

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

From: Account Name : REZNICSEK, FRASER, WHITE, & SHAFFER, P.A.
Account Number : I20030000107
Phone : (904) 567-1060
Fax Number : (904) 567-1065

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

Email Address: Mufuka @ att.net

FLORIDA PROFIT/NON PROFIT CORPORATION
Florida Medical Institute, Inc.

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$70.00

RECEIVED

13 NOV 18 AM 11:08

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

Electronic Filing Menu

Corporate Filing Menu

Help

1/4

r e z n i c s e k • f r a s e r



w h i t e • s h a f f e r

TO: Florida Department of State**From:** Donna Ciancutti**Fax:** 850-617-6381**Pages:** 5**Phone:****Date:** November 18, 2013**Re:** Florida Medical Institute, Inc.**CC:**

☐ **Urgent** ☐ **For Review** ☐ **Please Comment** ☐ **Please Reply** ☐ **Please Recycle**

Comments: Please file the following.....

{00193408-1 }

CONFIDENTIALITY NOTICE

THIS MESSAGE IS INTENDED ONLY FOR THE USE OF THE INDIVIDUAL OR ENTITY TO WHICH IT IS ADDRESSED AND MAY CONTAIN INFORMATION THAT IS PRIVILEGED, CONFIDENTIAL AND EXEMPT FROM DISCLOSURE UNDER APPLICABLE LAW. IF YOU ARE NEITHER THE INTENDED RECIPIENT NOR THE EMPLOYEE OR AGENT RESPONSIBLE FOR DELIVERING THIS MESSAGE TO THE INTENDED RECIPIENT, YOU ARE HEREBY NOTIFIED THAT ANY DISCLOSURE, COPYING, DISTRIBUTION OR THE TAKING OF ANY ACTION IN RELIANCE ON THE CONTENTS OF THIS TELECOPIED INFORMATION IS STRICTLY PROHIBITED. IF YOU HAVE RECEIVED THIS TELECOPY IN ERROR, PLEASE IMMEDIATELY NOTIFY US BY TELEPHONE AT (904) 567-1060 TO ARRANGE FOR RETURN OF THE ORIGINAL DOCUMENTS TO US.

09:47:49 a.m. 11-18-2013 3/5
FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
H13000254383 3
2013 NOV 18 PM 1:25

ARTICLES OF INCORPORATION
OF
FLORIDA MEDICAL INSTITUTE, INC.

The undersigned incorporator, for the purpose of forming a corporation in the state of Florida hereby adopts the following Articles of Incorporation.

Article I
Name and Duration

The name of this corporation is Florida Medical Institute, Inc. The duration of the corporation is perpetual. The effective date upon which this corporation shall come into existence shall be the date these Articles are filed by the Secretary of State.

Article II
Principal Office

The address of the principal office and mailing address of the corporation in the State of Florida is 841 Prudential Drive, 12th Floor, Jacksonville, Florida 32207.

Article III
Capital Stock

The maximum number of shares of stock which this corporation is authorized to have outstanding at any one time is one thousand (1,000) shares having no par value.

Article IV
Registered Office and Agent

The street address of the registered office of this corporation is 841 Prudential Drive, 12th Floor, Jacksonville, Florida 32207 and the name of the registered agent of this corporation at that address is Gabriel B. Mufuka, M.D.

Article V
Directors

1. This corporation shall have one (1) director initially. The number of directors may be increased or diminished from time to time by the bylaws, but shall never be less than one (1). The manner of selection of directors shall be as provided in the bylaws.

H13000254383 3

2. The name and street address of the sole member of the Board of Directors of this corporation is:

Name

Gabriel B. Mufuka, M.D.

Address841 Prudential Drive, 12th Floor
Jacksonville, Florida 32207

3. If any vacancy occurs in the Board of Directors during a term, the remaining directors, by affirmative vote of a majority thereof, may elect a director to fill the vacancy until the next annual meeting of shareholders.

Article VI**Bylaws**

The power to adopt, amend or repeal bylaws for the management of this corporation shall be vested in the Board of Directors or the shareholders, but the Board of Directors may not amend or repeal any bylaw adopted by the shareholders if the shareholders specifically provide that such bylaw is not subject to the amendment or repeal by the Board of Directors.

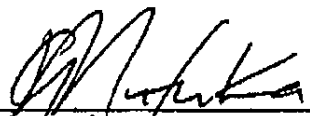
Article VII**Incorporator**

The name and street address of the incorporator of this corporation is Gabriel B. Mufuka, M.D., 841 Prudential Drive, 12th Floor, Jacksonville, Florida 32207.

Article VIII**Amendment**

This corporation reserves the right to amend, alter, change or repeal any provision contained in these Articles of Incorporation, in the manner now or hereafter prescribed by statute, and any right conferred upon the shareholders is subject to this reservation.

IN WITNESS WHEREOF, the incorporator has executed these Articles the 17th day of November, 2013.



Gabriel B. Mufuka, M.D., Incorporator

H13000254383 3

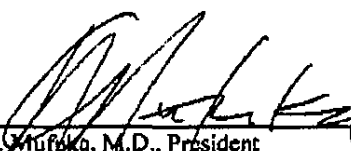
H13000254383 3

**CERTIFICATE DESIGNATING REGISTERED OFFICE AND REGISTERED
AGENT FOR THE SERVICE OF PROCESS WITHIN FLORIDA**

In compliance with Sections 48.091, 607.0501, 607.0505 and 621.13, Florida Statutes, the following is submitted:


Florida Medical Institute, Inc. desiring to organize or qualify under the laws of the State of Florida hereby designates Gabriel B. Mufuka, M.D., as its registered agent to accept service of process within the State of Florida, and the address of its registered office shall be 841 Prudential Drive, 12th Floor, Jacksonville, Florida 32207.

November 17, 2013


Gabriel B. Mufuka, M.D., President

Having been named to accept service of process for the above stated corporation, at the place designated in this certificate, I hereby agree to accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

November, 17, 2013


Gabriel B. Mufuka, M.D., Registered Agent

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
2013 NOV 18 PM 1:25

H13000254383 3