

**PAG000004585**

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.**

(((H14000010745 3)))



H140000107453ABCW

**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 : SHERIDAN HEALTHCORP, INC.  
Account Number : I20000000045  
Phone : (954) 838-2769  
Fax Number : (954) 851-1780

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

Email Address: adriana.tejada@shcr.com

**FLORIDA PROFIT/NON PROFIT CORPORATION**

**Perinatal Center of Florida, Inc.**

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$70.00

[Electronic Filing  
Menu](#)

[Corporate Filing Menu](#)

[Help](#)

RECEIVED  
14 JAN 16 PM 12:10  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

14 JAN 16 PM 12:10

14 JAN 16 PM 2:39

Fax Audit Number H14000010745 3

**ARTICLES OF INCORPORATION  
OF  
PERINATAL CENTER OF FLORIDA, INC.**

**ARTICLE I - NAME**

The name of this corporation is Perinatal Center of Florida, Inc. (the "Corporation").

**ARTICLE II - TERM**

The corporate existence of the Corporation shall be perpetual, unless and until terminated pursuant to Florida law.

**ARTICLE III - PURPOSE**

The Corporation is organized for the purpose of transacting any or all lawful business for corporations organized under The Florida Business Corporation Act of the State of Florida.

**ARTICLE IV - PRINCIPAL OFFICE ADDRESS**

The mailing and street address of the principal office of this Corporation, unless and until relocated, is 1613 North Harrison Parkway, Suite 200, Sunrise, Florida 33323.

**ARTICLE V - CAPITAL STOCK**

The aggregate number of shares which the Corporation shall have the authority to issue is 1,000 shares of Common Stock, par value \$.01 per share.

**ARTICLE VI - REGISTERED AGENT  
AND REGISTERED OFFICE**

The mailing and street address of the initial registered office of this Corporation is 1613 North Harrison Parkway, Suite 200, Sunrise, Florida 33323; and the name of the initial registered agent of this Corporation at that address is Jay A. Martus.

14 JAN 16 PM 12:10  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

Fax Audit Number H14000010745 3

**ARTICLE VII - INITIAL BOARD OF DIRECTORS**

The Corporation shall have two (2) initial directors. The number of directors may be either increased or decreased from time to time as provided in the Corporation's Bylaws, but shall never be less than one (1). The names and addresses of the initial directors of this Corporation are:

Robert Coward  
1613 North Harrison Parkway  
Suite 200  
Sunrise, FL 33323

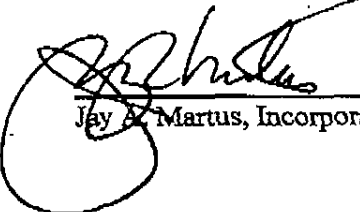
John Carlyle  
1613 North Harrison Parkway  
Suite 200  
Sunrise, FL 33323

**ARTICLE VIII - INCORPORATOR**

The name and address of the person signing these Articles of Incorporation is:

Jay A. Martus  
1613 North Harrison Parkway  
Suite 200  
Sunrise, FL 33323

IN WITNESS WHEREOF, the undersigned Incorporator has executed these Articles of Incorporation this 16<sup>th</sup> day of January, 2014.

  
Jay A. Martus, Incorporator

JAN/16/2014/THU 01:46 PM

P. 004/004

Fax Audit Number H14000010745 3

**CERTIFICATE DESIGNATING THE ADDRESS  
AND AN AGENT UPON WHOM PROCESS MAY BE SERVED**

**WITNESSETH:**

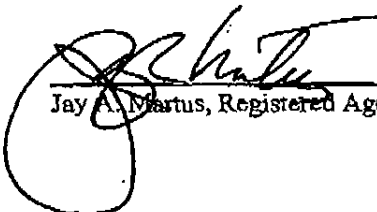
That Perinatal Center of Florida, Inc. (the "Corporation"), desiring to organize under the laws of the State of Florida, has named Jay A. Martus as its agent to accept service of process within this state.

Perinatal Center of Florida, Inc.  
1613 North Harrison Parkway  
Suite 200  
Sunrise, FL 33323

**ACKNOWLEDGMENT:**

Having been named to accept service of process for the Corporation, at the place designated in this Certificate, I hereby agree to act in this capacity, and further, I agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I accept the duties and obligations of Section 607.0505, Florida Statutes.

Dated this 16<sup>th</sup> day of January, 2014.

  
Jay A. Martus, Registered Agent

FILED  
14 JAN 16 PM 12:10  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA