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FAX NO.

01/04

Division of Corporations

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**P16 000040099**

Florida Department of State  
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Fax Number : (850) 617-6381

From:

Account Name : SMITH HULSEY & BUSEY  
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Phone : (904) 359-7700  
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Email Address: arsnyderma@gmail.com

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**FLORIDA PROFIT/NON PROFIT CORPORATION**  
**Dinosaurs and Ninjas, P.A.**

Certificate of Status	0
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**ARTICLES OF INCORPORATION  
OF  
DINOSAURS AND NINJAS, P.A.**

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act and the Professional Service Corporation and Limited Liability Company Act, hereby adopts the following Articles of Incorporation:

**ARTICLE I - NAME**

The name of this Corporation is Dinosaurs and Ninjas, P.A.

**ARTICLE II - PRINCIPAL OFFICE**

The street address of the initial principal place of business of this Corporation is 8450 Yellowtail Court, Stuart, FL 34997 and its mailing address is 44 Woodland Park, Hartford, Connecticut 06105.

**ARTICLE III - NATURE OF BUSINESS**

The purpose for which this Corporation is organized is to provide professional medical and healthcare services.

**ARTICLE IV - CAPITAL STOCK**

The number of shares of stock that this Corporation is authorized to have outstanding at any one time is one hundred (100) shares of common stock with a par value of \$.01 per share.

**ARTICLE V - BOARD OF DIRECTORS**

Aaron Snyder, M.D. shall be the initial member of the Board of Directors of this Corporation.

**ARTICLE VI - OFFICERS**

Aaron Snyder, M.D. shall be the initial President, Secretary and Treasurer of this Corporation.

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**ARTICLE VII - INITIAL REGISTERED AGENT AND ADDRESS**

The name and address of the initial registered agent are Northwest Registered Agent, LLC, 3030 N. Rocky Point Drive, Suite 150A, Tampa, Florida 33607.

**ARTICLE VIII - INDEMNIFICATION**

Directors and officers of this Corporation shall, and employees and agents may, be indemnified to the fullest extent permitted by Florida law.

**ARTICLE IX - INCORPORATOR**

The name and street address of the incorporator are Aaron Snyder, M.D., 44 Woodland Park, Hartford, Connecticut 06105.

**ARTICLE X - BYLAWS**

The Board of Directors shall adopt Bylaws for this Corporation and from time to time may modify, alter, amend or rescind the same by majority vote of the members of the Board of Directors present at any regular or special meeting or by written consent of all of the members of the Board of Directors.

**ARTICLE XI - AMENDMENTS**

This Corporation may amend, alter or repeal any provision of these Articles of Incorporation in the manner now or hereinafter provided by Florida law.

IN WITNESS WHEREOF, the undersigned incorporator has executed these Articles of Incorporation this 12 day of April, 2016.

  
Aaron Snyder, M.D.  
Incorporator

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Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____
_____	_____

**ARTICLE VI REGISTERED AGENT**The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: NORTHWEST REGISTERED AGENT LLC

Address: 3030 N. Rocky Point Dr., STE 150A  
Tampa, FL 33607

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**ARTICLE VII INCORPORATOR**The name and address of the Incorporator is:

Name: Aaron Snyder, MD

Address: 44 Woodland Park  
Hartford, CT 01605

**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: \_\_\_\_\_ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 9 business days after the filing.)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Tom Glover Tom Glover/Manager/Northwest Registered Agent LLC 4/29/16  
 Required Signature/Registered Agent Date

I submit this document and affirm that the facts stated herein are true. I am aware that the 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.

\_\_\_\_\_  
 Required Signature/Incorporator 4/29/16  
 Date

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