

1/29/2020

Division of Corporations

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

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

From:

Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (614)280-3338
Fax Number : (954)208-0845

****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
PSG Holding I, P.A.

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

Please keep file date 1-29-2020

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FEB 03 2020

T. SCOTT

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAMEThe name of the corporation shall be: PSG Holding I, P.A.**ARTICLE II PRINCIPAL OFFICE**Principal street address

Mailing address, if different is:

9500 South Dadeland Boulevard, Suite 200Miami, Florida 33156**ARTICLE III PURPOSE**The purpose for which the corporation is organized is: to provide professional medical services through its subsidiary,Puget Sound Gastroenterology, PLLC.**ARTICLE IV SHARES**The number of shares of stock is: 100**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: Eugenio Hernandez, M.D., PresidentName and Title: Eugenio Hernandez, M.D., SecretaryAddress: 9500 South Dadeland BoulevardAddress: 9500 South Dadeland BoulevardSuite 200Suite 200Miami, Florida 33156Miami, Florida 33156Name and Title: Eugenio Hernandez, M.D., Director

Name and Title: _____

Address: 9500 South Dadeland Boulevard

Address: _____

Suite 200Miami, Florida 33156

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

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Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

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

Name: C T Corporation System

Address: 1200 South Pine Island Road

Plantation, Florida 33324

ARTICLE VII INCORPORATORThe name and address of the incorporator is:

Name: Eugenio Hernandez, M.D.

Address: 9500 South Dadeland Boulevard, Suite 200

Miami, Florida 33156

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 days prior or 90 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

Katherine Schneider Katherine Schneider, Asst. Secretary

1/29/2020

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.

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Required Signature/Incorporator

1/17/2020

Date