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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : J. FISCHER & ASSOCIATES, INC.

Account Number : 119990000042 Phone : (561)799-3810 Fax Number : (561)799-1818

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

Email Address: BEHROUZ FELDOSIAN @ GMAIL. COM

# FLORIDA PROFIT/NON PROFIT CORPORATION BEHROUZ FERDOSIAN M.D., P.A.

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#### ARTICLES OF INCORPORATION

OF

#### BEHROUZ FERDOSIAN M.D., P.A.

#### **ARTICLE I**

#### **NAME**

The name of this corporation is BEHROUZ FERDOSIAN M.D., P.A.

#### **ARTICLE II**

#### **NATURE OF BUSINESS**

This Corporation may engage in any business activity or business permitted under the laws of The United States and the State of Florida. He is a licensed Medical Doctor in in the State of Florida.

#### ARTICLE III

#### CAPITAL STOCK

The maximum number of shares of stock that this Corporation is authorized to have outstanding at any one time is ONE THOUSAND (1,000) SHARES of common stock having \$1.00 par value.

#### **ARTICLE IV**

#### INITIAL CAPITAL

The amount of capital that this Corporation will begin with is FIVE HUNDRED (\$500.00) DOLLARS.

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#### **ARTICLE V**

#### **TERM OF EXISTENCE**

This Corporation shall have perpetual existence.

#### **ARTICLE VI**

#### INITIAL REGISTERED OFFICE AND AGENT

The address in the State of Florida of the principle office of this Corporation is 4265

Hyacinth Cir N, and the name of the initial registered agent at this address is Behrouz Ferdosian.

#### **ARTICLE VII**

#### **INITIAL BOARD OF DIRECTORS**

The Corporation shall have one (1) director initially. The number of directors may either be increased or diminished from time to time by the by-laws, but shall never be less than one.

#### **ARTICLE VIII**

#### **INITIAL DIRECTORS**

Behrouz Ferdosian, President 4265 Hyacinth Cir N Palm Beach Gardens, FL 33410

#### **ARTICLE IX**

#### **INCORPORATORS**

The name and address of the person signing these articles of incorporation is:

Behrouz Ferdosian 4265 Hyacinth Cir N Palm Beach Gardens, FL 33410

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IN WITNESS WHEREOF, the undersigned subscribers have executed these articles of
incorporation this 1st Day of September, 2020.
Madadecon Behrouz Ferdosian
STATE OF FLORIDA
COUNTY OF PRIM BEACH
Before me, a notary public authorized to take acknowledgments in the state and county set forth above, Behrouz Ferdosian, appeared, Personally Known; OR Produced Identification, by me to be the person who executed these articles of incorporation.
IN WITNESS THEREOF, I have hereunto set my hand and official seal, in the state and county aforesaid, this Day of Syknibar, 2020.
Type of Identification Produced  Notary Public
BRYN WILLIAMS Contembration # GG 151826 Expires December 4, 2021 Pended Thre Budget Hotery Survive

CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN FLORIDA, NAMING AGENT UPON WHOM PROCESS MAY BE SERVED.

IN COMPLIANCE WITH SECTION 48,091, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED:

FIRST—BEHROUZ FERDOSIAN M.D., P.A. DESIRES TO ORGANIZE UNDER THE LAWS OF THE STATE OF FLORIDA WITH ITS PRINCIPLE PLACE OF BUSINESS AT THE CITY OF PALM BEACH GARDENS, PALM BEACH COUNTY, STATE OF FLORIDA, HAS NAMED, Behrouz Ferdosian AT 4265 Hyacinth Cir N, Palm Beach Gardens, Florida, 33410 AS ITS AGENT TO ACCEPT PROCESS WITHIN FLORIDA.

SIGNED_	M Vorder
TITLE _	PRESIDENT
DATE _	9.1.20

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN ACCORDANCE WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES.

SIGNED Welste
Behrouz Ferdosian
Resident Agent

DATE 9.1.20