### Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : J. FISCHER & ASSOCIATES, INC.

Account Number : I19990000042 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: ALEXMIRAKIAN & VAHOO. COM. ALL

### FLORIDA PROFIT/NON PROFIT CORPORATION ALEX S. MIRAKIAN M.D., P.A.

| Certificate of Status | 1       |
|-----------------------|---------|
| Certified Copy        | 0       |
| Page Count            | 05      |
| Estimated Charge      | \$78.75 |

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# 4200003895503

#### ARTICLES OF INCORPORATION

OF.

ALEX S. MIRAKIAN M.D., P.A.

#### **ARTICLE I**

#### <u>NAME</u>

The name of this corporation is ALEX S. MIRAKIAN 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. They are licensed to practice medicine 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 5480 N Ocean Drive, Apt B1D, Singer Island FL 33404, and the name of the initial registered agent at this address is Troy Grogan.

#### **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

Alex Mirakian, President 10 E Archer St, Apt 1311 Tulsa, OK 74103

#### **ARTICLE IX**

#### **INCORPORATORS**

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

Alex Mirakian 10 E Archer St, Apt 1311 Tulsa, OK 74103 0:11 HY 91 AON 1582

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| IN WITNESS WHEREOF, the undersigned subscribers have executed these articles of  | of   |             |   |
|--|--|-------------|---|
| incorporation this 24 Day of Octobial, 2020.   |  |             |   |
| Lechiane   |  |             |   |
| Alex Mirakian  |  | 2621        |   |
|  | 3 3 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4    | NO.         | - |
| STATE OF DISTANCE  | * 11<br>********************************** | 91 AON 1582 | ! |
| COUNTY OF TUIS   |  | <b>X</b>    |   |
| Before me, a notary public authorized to take acknowledgments in the state and set forth above, Alex Mirakian, appeared, Personally Known; OR Product Identification, by me to be the person who executed these articles of incorporation. | county<br>ed -                             | AM 11: 08   |   |
| IN WITNESS THEREOF, I have hereunto set my hand and official seal, in the and county aforesaid, this 21 Day of 0 1965, 2020.   | e state                                    |             |   |
| Priver Licage  |  |             |   |
| Type of Identification Produced  |  |             |   |
| OFFICIAL SEAL TREVOR ELLIS NOTARY PUBLIC OKLAHOMA TULSA COUNTY COMM. EXP. 08-10-2022 COMM. NO. 18009178  |  |             |   |

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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—ALEX S. MIRAKIAN 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 Singer/sland, Paim Exach County, State of Floods, HAS NAMED, Troy Grogan AT 5480 N Ocean Drive, Apt BID, Singer Island FL 33404, AS ITS AGENT TO ACCEPT PROCESS WITHIN FLORIDA.

SIGNED AUM; ala

TITLE PRESIDENT

DATE 10.24.2020

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

Troy Grogan Resident Agent

DATE

November 5 2020

O: HWW 91 AON ESS