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Florida Department of State
Division of Corporations
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****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: ANDREW@AHCPAPLLC.COM

**FLORIDA PROFIT/NON PROFIT CORPORATION
GASTRO FLORIDA PROFESSIONAL ASSOCIATION**

| | |
|-----------------------|---------|
| Certificate of Status | 1 |
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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Corporate Filing Menu

He **D. O'KEEFE**

MAR 18 2022

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ARTICLES OF INCORPORATION

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

ARTICLE I NAMEThe name of the corporation shall be: GASTRO FLORIDA PROFESSIONAL ASSOCIATION**ARTICLE II PRINCIPAL OFFICE**Principal ~~street~~ address
21097 NE 27TH COURT, SUITE 330
AVENTURA, FL 33180Mailing address, if different is:

_____**ARTICLE III PURPOSE**The purpose for which the corporation is organized is: MEDICINE

_____**ARTICLE IV SHARES**The number of shares of stock is: 1,500 AT NO PAR VALUEFILED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: JASON RUBINOV - PRESIDENT/DIRECTOR

Name and Title: _____

Address 21097 NE 27TH COURT, SUITE 330
AVENTURA, FL 33180Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

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: JASON RUBINOV
 Address: 21097 NE 27TH COURT, SUITE 330
 AVENTURA, FL 33180

ARTICLE VII INCORPORATORThe name and address of the Incorporator is:

Name: JASON RUBINOV
 Address: 21097 NE 27TH COURT, SUITE 330
 AVENTURA, FL 33180

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 TALLAHASSEE, FLORIDA

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*_____
Required Signature Registered Agent

MARCH 9, 2022

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

MARCH 9, 2022

Date

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