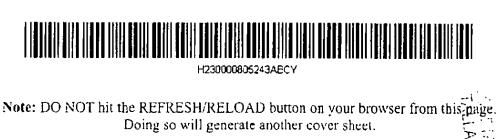
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Division of Corporations

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Division of Corporations

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FLORIDA PROFIT/NON PROFIT CORPORATION ELIE FEGAHLI MD PA

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Help

7.3



ARTICLES OF INCORPORATION

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

WIFU PRO	NCIPAL OFFICE		
Principal street address 13630 Newport Shores Drive		Mailing addre	ess, if different is:
		13630 Newport Shores Drive	
udson, FL 34669		Hudson, FL 34669	
			
<u>TIÇLE III PUR</u>	<u>POSE</u>		
purpose for whic	h the corporation is organized is: Gener	al Medical Practitoner	 .
	_		
•			
			2023 HAR TALL
TICLE IV SHA	RES		그 ~
number of shares	of stock is: 100		三二年 第
			≥ F 1
TICLE V INIT	LAL OFFICERS AND/OR DIRECTORS		基温 2
	IAL OFFICERS AND/OR DIRECTORS		2 N AASS
	TAL OFFICERS AND/OR DIRECTORS tle: Dr. Elie Fegahli, President		ASSE ASSE
Name and Ti	tle: Dr. Elie Feguhli, President	Name and Title:	AN OF ST
	· ·	Name and Title:	2 AH 2: 28 RY OF STAT HASSEE, FL
Name and Ti	tle: Dr. Elie Feguhli, President	Name and Title:	
Name and Ti	tle: Dr. Elie Feguhli, President 13630 Newport Shores Drive	Name and Title:	Siyit 28
Name and Ti	tle: Dr. Elie Feguhli, President 13630 Newport Shores Drive	Name and Title:Address:	Siyit 28
Name and Ti	tle: Dr. Elie Feguhli, President 13630 Newport Shores Drive Hudson, FL 34669	Name and Title:Address:	Siyit 28
Name and Ti	tle: Dr. Elie Feguhli, President 13630 Newport Shores Drive Hudson, FL 34669	Name and Title:Address:	S1711E
Name and Ti	tle: Dr. Elie Feguhli, President 13630 Newport Shores Drive Hudson, FL 34669	Name and Title:Address:	S1711E
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Name and Ti Address Name and Tit Address	tle: Dr. Elie Fegahli, President 13630 Newport Shores Drive Hudson, FL 34669 le:	Name and Title: Address: Name and Title: Address: Nume and Title:	STATE STATE

Name a	nd Title:	Name and Title:	
Addres	ss	Address:	
		_	
	<u>REGISTERED AGENT</u> Forida street address (P.O. Box NOT acceptable)	of the registered agent is:	
Name:	Dr. Elie Fegahli	_	
Address:	13630 Newport Shores Drive	_	
	Hudson, FL 34669	_	
ARTICLE VII	<u>INCORPORATOR</u>		
The name and a	ddress of the Incorporator is:		
Name;	Dr. Elic Fegahli	_	TALLAH
Address:	13630 Newport Shores Drive	_	ALL A
	Hudson, FL 34669	_	MAR -2 I
Effective date, if	EFFECTIVE DATE: fother than the date of filing: February 27, 2023 date is listed, the date must be specific and cann		SEE, SEE,
	e inserted in this block does not meet the applicable effective date on the Department of State's records		his date will not be listed as
Having been nan certificate, I am j	ned as registered agent to accept service of process familiar with and accept the appointment as registe	for the above stated corporation of tred agent and agree to act in this	ut the place designated in this capacity
	the state of the s		2/27/2023
	Required Signature/Registered Agent		Date
I submit this document to the	cument and affirm that the facts stated herein are Department of State constitutes a third degree felor	e true. I am aware that the false ny as provided for in s.817.155, F	information submitted in a CS
	the state of the s		2/27/2023
Required Signati	ure/Incorporator	Date	