

Feb. 15, 2024 2:36PM

At: 1225 P. 1

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Florida Department of State
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FLORIDA PROFIT/NON PROFIT CORPORATION
ANDREW SILVERMAN MD P.A.

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No. 1225 E. 2

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

ARTICLE I NAME

The name of the corporation shall be: Andrew Silverman MD P.A.

ARTICLE II PRINCIPAL OFFICE

Principal street address

3195 Harrington Drive
Boca Raton FL 33496-2506

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

to provide medical, psychiatric and psychological services.

ARTICLE IV SHARES

The number of shares of stock is: 200

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Andrew Silverman, President

Name and Title:

Address 3195 Harrington Drive

Address:

Boca Raton FL 33496-2506

Name and Title:

Name and Title:

Address

Address:

Name and Title:

Name and Title:

Address

Address:

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H24 0000 636203 No. 1225 P. 3

Name and Title: _____ Name and Title: _____
Address: _____ Address: _____

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Andrew Silverman _____
Address: 3195 Harrington Drive _____
Boca Raton Fl 33496-2506 _____

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Andrew Silverman _____
Address: 3195 Harrington Drive _____
Boca Raton Fl 33496-2506 _____

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

X Andrew I. Silverman
Required Signature/Registered Agent

X 02/12/2024
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.

X Andrew I. Silverman
Required Signature/Incorporator

X 02/12/2024
Date

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