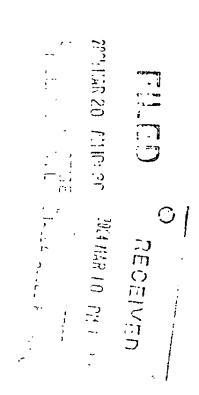


(Requestor's Name)	
(Address)	_
(Address)	
(City/State/Zip/Phone #)	—
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	_
•	
Special Instructions to Filing Officer:	







W24000045294



115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Account#: 120000000088 If there are any issues please contact Patrice at 850-202-9071

Date: 04/08	8/2024		
Name: F	Patrice Rush		
Reference #:		<u></u>	
Entity Name:	B AES	STHETICS, P.A.	
✓ Articles of Ir	ncorporation/Authorization	on to Transact Business	
Amendment	t		
☐ Change of A	Agent		
Reinstateme	ent		
☐ Conversion			-5
Merger			
☐ Dissolution/	Withdrawal		20
Fictitious Na	ame		
Other	PLEASE I	PROVIDE CERTIFIED COPY	7
Authorized Amount	t: \$78.75		

F: +852.2682.9790



115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Account#: I20000000088 If there are any issues please contact Patrice at 850-202-9071

Date:	04/08/2024	
Name:	Patrice Rush	
	2303655	
	ne:BAES	THETICS, P.A.
	cles of Incorporation/Authorizatio	
Am	endment	
Cha	ange of Agent	
☐ Rei	instatement	
☐ Cor	nversion	
Me	rger	
☐ Dis	solution/Withdrawal	
☐ Fict	titious Name	
☐ Oth	nerPLEASE P	ROVIDE CERTIFIED COPY
	670.76	
Authorized		
Signature:	: Pull	

F: +852.2682.9790

COVER LETTER

Department of State New Filing Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

SUBJECT: B	A Medical Group, P.A. (PROPOSED CORPORAT	TE NAME – <u>MUST INCL</u> I	UDE SUFFIX)		
Enclosed are an ori	ginal and one (1) copy of the artic	cles of incorporation and	l a check for:	_	
□ \$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy	☐ \$87.50 Filing Fee, Certified Copy & Certificate of Status		
	;	ADDITIONAL CO	PY REQUIRED	_	
FROM:	Patrick Davoodi Name	(Printed or typed)			
	1875 Century Park East, Suite	ddress			
	Los Angeles, CA 90067	duicss			
	(626) 372-1216	State & Zip		Just.	(2 - -
	Daytime To	lephone number		7:20 7:20	- P 25.
	E-mail address: (to be used	for future annual report r	notification)	7310: 30	

NOTE: Please provide the original and one copy of the articles.

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

CLE II PRI	NCIPAL OFFICE		
Kane Conco	Principal <u>street</u> address	Mailing ad	dress, if different is:
	ls, FL 33154		
IÇLE III PUR	POSE		
urpose for whic	h the corporation is organized is: Practic	e of Medicine	
		<u>-</u>	
TICLE IV SHA	IRES of stock is: 100		
TICLE IV SH. number of shares	of stock is: 100		
number of shares	of stock is: 100 TIAL OFFICERS AND/OR DIRECTORS		
number of shares	of stock is: 100	Name and Title:	
number of shares	of stock is: 100 FIAL OFFICERS AND/OR DIRECTORS Michael Salzhauer, M.D.	Name and Title:	
number of shares TICLE V INIT Name and T	of stock is: 100 FIAL OFFICERS AND/OR DIRECTORS Michael Salzhauer, M.D. itle: (Director, President, Secretary, Treasurer)		
number of shares TICLE V INIT Name and T	of stock is: 100 FIAL OFFICERS AND/OR DIRECTORS Michael Salzhauer, M.D. itle: (Director, President, Secretary, Treasurer) 1140 Kane Concourse		
number of shares TICLE V INIT Name and T	of stock is: 100 FIAL OFFICERS AND/OR DIRECTORS Michael Salzhauer, M.D. itle: (Director, President, Secretary, Treasurer) 1140 Kane Concourse		27 THE 20
number of shares TICLE V INIT Name and T	of stock is: 100 FIAL OFFICERS AND/OR DIRECTORS Michael Salzhauer, M.D. itle: (Director, President, Secretary, Treasurer) 1140 Kane Concourse Bay Harbor Islands, FL 33154		77741.77.20 f.11 \$
number of shares TICLE V INIT Name and T Address	of stock is: 100 FIAL OFFICERS AND/OR DIRECTORS Michael Salzhauer, M.D. itle: (Director, President, Secretary, Treasurer) 1140 Kane Concourse Bay Harbor Islands, FL 33154	Address: Name and Title:	275-1177-280 7.71 Pr
number of shares TICLE V INIT Name and T Address Name and Ti	of stock is: 100 FIAL OFFICERS AND/OR DIRECTORS Michael Salzhauer, M.D. itle: (Director, President, Secretary, Treasurer) 1140 Kane Concourse Bay Harbor Islands, FL 33154	Address: Name and Title:	774177 20 7.11 C:
number of shares TICLE V INIT Name and T Address Name and Ti	of stock is: 100 FIAL OFFICERS AND/OR DIRECTORS Michael Salzhauer, M.D. itle: (Directox, President, Secretary, Treasurer) 1140 Kane Concourse Bay Harbor Islands, FL 33154	Address: Name and Title:	275-1177-280 7.71 Pr
number of shares TICLE V INIT Name and T Address Name and Ti	of stock is: 100 FIAL OFFICERS AND/OR DIRECTORS Michael Salzhauer, M.D. itle: (Director, President, Secretary, Treasurer) 1140 Kane Concourse Bay Harbor Islands, FL 33154	Address: Name and Title:	27 1 1 2
Name and Ti Address	of stock is: 100 FIAL OFFICERS AND/OR DIRECTORS Michael Salzhauer, M.D. itle: (Directox, President, Secretary, Treasurer) 1140 Kane Concourse Bay Harbor Islands, FL 33154	Address: Name and Title: Address:	27412720 CH (2.35)
Name and Ti Address	of stock is: 100 FIAL OFFICERS AND/OR DIRECTORS Michael Salzhauer, M.D. itle: (Director, President, Secretary, Treasurer) 1140 Kane Concourse Bay Harbor Islands, FL 33154	Address: Name and Title: Address: Name and Title:	27412720 CH (2.35)

	nd Title:	Name and Title:	
Addres	s	Address:	
	REGISTERED AGENT lorida street address (P.O. Box NOT acceptable) of	the registered agent is:	
Name:	Cogency Global Inc.		
Address:	115 North Calhoun Street, Suite 4		
	Tallahassee, FL 32301		
The <u>name and a</u> Name:	ddress of the Incorporator is: Patrick Davoodi		
(Addito)	1875 Century Park East, Suite 1600	_	
Address:	1075 Century Fair East, Suite 1000		
	Los Angeles, CA 90067	-	
Address:	Los Angeles, CA 90067 EFFECTIVE DATE:	(OPTIONAL)	
Address: ARTICLE VIII Effective date, i	Los Angeles, CA 90067	(OPTIONAL) It be more than five days prior or 90 c	days after
Address: <u>ARTICLE VIII</u> Effective date, i (If an effective filing.) <u>Note:</u> If the dat	Los Angeles, CA 90067 EFFECTIVE DATE: Tother than the date of filing:	t be more than five days prior or 90 c	·- ~;

r. 1 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.

3/20/2024 Required Signature Incorporator Date