

To:

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2024-06-11 07:24:38 CST

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From: David Thomas

6/11/24, 9:22 AM

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Florida Department of State

Division of Corporations

Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023

Phone : (614)280-3338

Fax Number : (614)573-3996

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: adrian.rawlinson@speedyhealth.com

RECEIVED
2024 JUN 11 AM 10:31
CORPORATIONS
COMMERCIAL
OFFICE

FLORIDA PROFIT/NON PROFIT CORPORATION

Iatros Health Group P.A.

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$70.00

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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: Iatros Health Medical Group P.A.**ARTICLE II PRINCIPAL OFFICE**Principal ~~street~~ address
11 Piedmont Road, Larkspur, CA 94939

Mailing address, if different is:

ARTICLE III PURPOSEThe purpose for which the corporation is organized is: Practicing Medicine**ARTICLE IV SHARES**The number of shares of stock is: 100**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: Dr Adrian Rawlinson Incorporator

Name and Title: _____

Address 11 Piedmont Road, Larkspur, CA 94939

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

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: CT Corporation System
Address: 1200 South Pine Island Road Plantation,
FL 33324

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Dr Adrian Rawlinson
Address: 11 Piedmont Road, Larkspur, CA 94939

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

By: CT Corporation System Rachel Elman 6/10/2024
Required Signature/Registered Agent 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.

AJ. Kelly 5/22/2024
Required Signature/Incorporator Date