Electronic Articles of Incorporation For

PRM GYNECOLOGY OF FLORIDA, P.A.

P24000070311
FILED
November 14, 2024
Sec. Of State
fjeggleston

The undersigned incorporator, for the purpose of forming a Florida profit corporation, hereby adopts the following Articles of Incorporation:

Article I

The name of the corporation is:

PRM GYNECOLOGY OF FLORIDA, P.A.

Article II

The principal place of business address:

2090 PALM BEACH LAKES BLVD, SUITE 700
WEST PALM BEACH, FL. US 33409

The mailing address of the corporation is:

2090 PALM BEACH LAKES BLVD, SUITE 700
WEST PALM BEACH, FL. US 33409

Article III

The purpose for which this corporation is organized is:

MEDICINE

Article IV

The number of shares the corporation is authorized to issue is:

1000

Article V

The name and Florida street address of the registered agent is:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL. 33324

I certify that I am familiar with and accept the responsibilities of registered agent.

Registered Agent Signature: BRIAN LEFEVRE

P24000070311
FILED
November 14, 2024
Sec. Of State
fjeggleston

Article VI

The name and address of the incorporator is:

ALLYSON SHRIKHANDE, M.D.
2090 PALM BEACH LAKES BLVD, SUITE 700

WEST PALM BEACH, FL 33409

Electronic Signature of Incorporator: ALLYSON SHRIKHANDE, M.D.

I am the incorporator submitting these Articles of Incorporation and affirm that the facts stated herein are true. I am aware that 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. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of this corporation and every year thereafter to maintain "active" status.

Article VII

The initial officer(s) and/or director(s) of the corporation is/are:

Title: P
ALLYSON SHRIKHANDE, M.D.
2090 PALM BEACH LAKES BLVD, SUITE 700
WEST PALM BEACH, FL. 33409 US

Title: T
ALLYSON SHRIKHANDE, M.D.
2090 PALM BEACH LAKES BLVD, SUITE 700
WEST PALM BEACH, FL. 33409 US

Title: S
ALLYSON SHRIKHANDE, M.D.
2090 PALM BEACH LAKES BLVD, SUITE 700
WEST PALM BEACH, FL. 33409 US

Title: D
ALLYSON SHRIKHANDE, M.D.
2090 PALM BEACH LAKES BLVD, SUITE 700
WEST PALM BEACH, FL. 33409 US