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TRANSMITTAL LETTER

FILED

95 APR 19 PM 2:34

CLERK OF COURT
TALLAHASSEE, FLORIDA

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

SUBJECT: EMMA A. AVIATION
(proposed corporate name)

Enclosed please find an original and one (1) copy of the articles of incorporation for the above corporation and check in the amount of \$ 112.50.

FROM:

William C. Lench, MD
Name
3505 Northwood
Address
Naples FL 33942
City, State, & Zip
(813) 643-4635
Telephone Number

Margaret O'Halloran
GAVE

AUTHORIZATION BY PHONE TO
CORRECT Carl Suffick
DATE 4-24-95
DOC EXAM Deirdre Brown

RECEIVED
TALLAHASSEE, FLORIDA
APR 19 1995

Note: Additional copy of articles is needed only when certified copy is requested.

ARTICLES OF INCORPORATION

OF

EMMA A. AVIATION, CORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

EMMA A. AVIATION, CORPORATION

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

3505 North Rd
Naples
Florida 33942

ARTICLE III CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

100

ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:

William Charles Leach M.D.
3505 North Rd
Naples FL 33942

ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

William Charles Leach m.d

MARGARET Patricia O'Halloran

EMMA Alexandra O'Halloran Leach

The undersigned has(have) executed these Articles of Incorporation this

17 ~~day~~ day of April, 19 95.

William Charles Leach

Signature/Title

President

MARGARET O'Halloran

Signature/Title

Vice President

EMMA O'Halloran Leach

Signature/Title

Treasurer

CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section 607.0501, Florida Statutes, the undersigned corporation, organized under the laws of the state of Florida, submits the following statement in designating the registered office/registered agent, in the state of Florida.

1. The name of the corporation is: EMMA A. AVIATION

2. The name and address of the registered agent and office is:

Brandon Keith William Leach M.D.
(NAME)

3005 North Rd
(P.O. BOX NOT ACCEPTABLE)

Naples FL 33942
(CITY/STATE/ZIP)

SIGNATURE W. Leach
(corporate officer)

TITLE President

DATE 3/30/95

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

SIGNATURE W. Leach

DATE 3/30/95

REGISTERED AGENT FILING FEE: \$35.00