

P95000060195

TRANSMITTAL LETTER

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

SUBJECT: H & S MEDICAL PRACTICE Inc  
(Proposed corporate name - must include suffix)

Enclosed is an original and one (1) copy of the articles of incorporation and a check for :

☐ \$70.00  
Filing Fee

☐ \$78.75  
Filing Fee  
& Certificate

☐ \$122.50  
Filing Fee  
& Certified Copy

☒ \$131.25  
Filing Fee,  
Certified Copy  
& Certificate

Additional Copy Required

FROM: DR Sabine Hazan & Dr Alon Steinberg  
Name (printed or typed)

105 EVANS DRIVE  
Address

JACKSONVILLE, FL, 32250  
City, State & Zip

1-904-247-0055  
Daytime Telephone number

200001552502  
-08/03/95--01021--018  
\*\*\*\*131.25 \*\*\*\*131.25

AUG 4 1995 BSB

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

## ARTICLES OF INCORPORATION

FILED  
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*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:

H & S MEDICAL PRACTICE Inc.

### ARTICLE II PRINCIPAL OFFICE

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

105 EVANS DRIVE, JACKSONVILLE, FLORIDA, 32250

### ARTICLE III SHARES

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

1000 at 1/8 value.

### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Dr. A. STEINBERG

105 EVANS DRIVE , JACKSONVILLE, FLORIDA, 32250

**ARTICLE V INCORPORATOR(S)**

**See instructions for officers/directors**

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

Dr Sabine Hazan:  
105 EVANS DR, JACKSONVILLE, FL, 32250

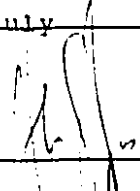
*CHIEF PRESIDENT/TREASURER*

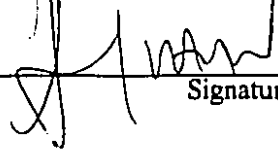
DR Alon Steinberg  
105 EVANS DR, Jacksonville, FL, 32250

*PRESIDENT*

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

25th day of July, 1995

  
\_\_\_\_\_  
Signature

  
\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

**NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.**

**CERTIFICATE OF DESIGNATION OF  
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: H & S MEDICAL PRACTICE Inc

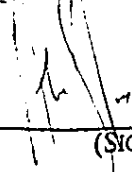
2. The name and address of the registered agent and office is:

Dr. A. STEINBERG  
(NAME)

105 EVANS DRIVE  
(P.O. Box or Mail Drop Box **NOT** ACCEPTABLE)

JACKSONVILLE, FLORIDA, 32250  
(CITY/STATE/ZIP)

*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)

07/25/95  
(DATE)