

P96000016825

130 HAYS COURT
ALLANDALE, FL 33001
904-222-0393 FAX



EFFECTIVE DATE

2/21/96

ACCOUNT NO. : 072100000032

REFERENCE : 056445 01501A

AUTHORIZATION :

Patricia Pujols

COST LIMIT : \$ 70.00

ORDER DATE : February 22, 1996

ORDER TIME : 3:0 PM

ORDER NO. : 056445

CUSTOMER NO: 01501A

200001721992

CUSTOMER: Mr. Howard A. Levine
LAWRENCE A. LEVINE, ESQ

Suite E-207
4300 N. University Drive
Ft. Lauderdale, FL 33351

DOMESTIC FILING

NAME: MARY R. MAILLOUX, M.D., P.A.

EFFECTIVE DATE: Y

☒ ARTICLES OF INCORPORATION
☐ CERTIFICATE OF LIMITED PARTNERSHIP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

☐ CERTIFIED COPY
☒ PLAIN STAMPED COPY
☐ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: GLS

EXAMINER'S INITIALS: *SMS*

FILED RECEIVED
96 FEB 22 AM 10:43:22 PM 4:16
DIVISION OF STATE CLERK
TALLAHASSEE, FLORIDA

2/23/96
23

EFFECTIVE DATE
2/21/96

ARTICLES OF INCORPORATION
OF
MARY R. MAILLOUX, M.D., P.A.

FILED
96 FEB 22 AM 10:43
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Article I - Name

The name of the corporation shall be: **MARY R. MAILLOUX, M.D., P.A.**

Article II - Principal Office

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

10781 SW 11th Court
Davie, FL 33324

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 - Registered Agent

The name and address of the registered agent is:

Lawrence A. Levine, P.A.
Suite A-106
4300 N. University Drive
Fort Lauderdale, FL 33351

Article V - Effective Date

These articles of incorporation shall be effective immediately upon execution.

Article VI - Incorporator


The name and street address of the incorporator to these Articles of Incorporation is:

Mary R. Mailloux, M.D.
10781 SW 11th Court
Davie, FL 33324

Article VII - Purpose

The specific purpose for this corporation is to engage in the practice of medicine.

The undersigned has executed these Articles of Incorporation on February 21, 1996



Mary R. Mailloux, M.D.

CERTIFICATE OF DESIGNATION

REGISTERED AGENT

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 agent, in the State of Florida.

1. The name of the corporation is: MARY R. MAILLOUX, M.D., P.A.
2. The name of the registered agent is:

Lawrence A. Levine, P.A.
Suite A-106
4300 N. University Drive,
Fort Lauderdale, FL 33351

Signature:


Lawrence A. Levine, President

Date: February 21, 1996

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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 THE AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

LAWRENCE A. LEVINE, P.A.

Signature:


Lawrence A. Levine - President

Date: February 21, 1996