P9600065852

Department of State Division of Corporation P. O. Box 6327 Tallahassee, FL 32314	na L			90000 -07/25/36 *****134.	50105]42명미 7008 **191.25	
SUBJECT: <u>SUNDI</u>		KNTER, P. A. name - must include su	ffix)	RETARY OF STATE MIASSEE, FLORDA	ドILEU M5-7 附2:38		
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 Additional Copy	X \$131.25 Filing Fee, Cardified Cop & Cerdificate Required				
FROM: Modesto Ordoqui, M.D. Name (printed or typed)							
5100 Sunbeam Rd. swite 6-7 Address							
Mandarin, P1, 32257 City, State & Zip							
(904)_880-2255 Daytime Telephone number							

-189-6-15-630-671

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

W96-15758

M8-7-96



July 29, 1996

MODESTO ORDOQUI, M.D. 5100 SUNBEAM ROAD SUITE 6-7 MANDARIN, FL 32257

SUBJECT: SUNBEAM MEDICAL CENTER, P.A.

Ref. Number: W96000015758

We have received your document for SUNBEAM MEDICAL CENTER, P.A. and your check(s) totaling \$131.25. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain written acceptance by the registered agent, (i.e. "I hereby am familiar with and accept the duties and responsibilities as registered agent for said corporation"); and the registered agent's signature.

The specific nature of business of the professional association must be stated in the document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6052.

Neysa Culligan Document Specialist

Letter Number: 096A00036219

ARTICLES OF INCORPORATION

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:

SUNDRAM MEDICAL CENTER, P.A.

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ARTICLE II PRINCIPAL OFFICE

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

5100 SUNBEAM ROAD SUITE 6-7 MANDARIN, FLORIDA 32257

ARTICLE III SHARES

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

The Capital Stock of this Professional Association shall consist of 1000 shares of Common Stock of \$1.00 Par Value each, all or part of said stock to be issued from time to time as determined by the board of directors.

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS
The name and address of the initial registered agent is:

Modesto Ordoqui, M.D. 5100 Sunbeam Rd. Suite 6-7 Mandarin, F1. 32257

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);

The business and property of this Professional Association shall be managed by a Board of Directors consisting of one (1) or more members as may be provided in the Dy-Laws.

The names and post office addresses of the first Board of Directors of this Professional Association, subject to provisions of this certificate, the By-Laws of this Professional Association and the laws of the State of Florida, shall hold office for the first year of this Professional Association's existense or until their successors are elected and have qualified, are as follows:

Residing at:

عالها والعالما

Modesto Ordoqui, M.D. 622 Hibernia Oaks Dr.

Green Cove Springs, F1. 32043

Purpose: The business purpose of the Professional Association will be to provide Medical services, diagnostic, and treament as related to medical conditions.

The foregoing purposes and activities will be interpreted as examples only and not as limitations, nothing therein shall be deemed as prohibiting the P.A. from extending it's activities to any related business purpose.

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

22 day o	e <u>july</u>	, 19 <u>96</u>
		Signature
	· · · · · · · · · · · · · · · · · · ·	Signature
•		Signature

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

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of sections 607.0501 or 617.0501, 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.

The name of the corporation is: SUNDEAM MEDICAL CENTER.	P.A.
The name and address of the registered agent and office is:	***************************************
MODESTO ORDGOUI, M.D.	도 되었다.
(NAME)	尼州 昌 市
5100 SUNBRAM ROAD, SUITE 6-7	一 题 气产
(P.O. BOX <u>NOT</u> ACCEPTABLE)	
MANDARIN, PL. 32257	SI D
(CITY/STATE/ZIP)	8 गाउँ
	The name and address of the registered agent and office is: MODESTO ORDGOUL. M.D. (NAME) 5100 SUNBRAM ROAD, SUITE 6-7 (P.O. BOX NOT ACCEPTABLE) MANDARIN. FL. 32257

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 _	3.0	
DATE	-96	

REGISTERED AGENT FILING FEE: \$35.00