

P960000068937

TRANSMITTAL LETTER

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

000001910590
-08/01/96--01040--012
*****78.75 *****78.75

SUBJECT: FREDDY AVNI, M.D., P.A.
(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: FREDDY AVNI, M.D.
Name (printed or typed)

1511 Forest Hill Blvd., Suite 4
Address

West Palm Beach, FL 33406
City, State & Zip

(561) 964-0552
Daytime Telephone number

FILED
96 AUG 19 PM 2:53
TALLAHASSEE, FLORIDA

W96-16188

AL AUG 19 1996

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



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

August 2, 1996

FREDDY AVNI, M.D.
1511 FOREST HILL BLVD., SUITE 4
WEST PALM BEACH, FL 33406

SUBJECT: FREDDY AVNI, M.D., P.A.
Ref. Number: W96000016188

We have received your document for FREDDY AVNI, M.D., P.A. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

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

The document must state the number of shares of authorized stock.

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) 487-6928.

Agnes Lunt
Corporate Specialist

Letter Number: 296A00037059

ARTICLES OF INCORPORATION

FILED

96 AUG 19 PM 2:53

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:

FREDDY AVNI, M.D., P.A.

ARTICLE II PRINCIPAL OFFICE

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

1511 Forest Hill Blvd., Suite 4
West Palm Beach, FL 33406

ARTICLE III SHARES

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

A. The maximum number of shares of stock that the Corporation is authorized to have outstanding at any time shall be one thousand five hundred (1,500) shares of common stock at One Hundred (\$100.00) Dollars par value.

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

FREDDY AVNI, M.D.
1100 Bear Island Drive
West Palm Beach, FL 33409

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):

DIRECTOR: FREDDY AVNI M.D.
1100 Bear Island Drive
West Palm Beach, FL 33409

The general nature and purposes of business to be transacted, promoted and carried on by the Corporation are as follows:

- A. To engage in the practice of medicine as a professional corporation and to own and operate a medical office for the purposes of providing medical care and treatment.
- B. To promote medical knowledge and to furnish related laboratory and clinical services; and to enter into contracts, and engage in any lawful business necessary for the rendering of such professional services.

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

_____ day of _____, 19_____.

(An additional article must be added if an effective date is requested.)

X Freddy Avni
Signature

Signature

Signature

Notarization is not required

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: FREDDY AVNI, M.D., P.A.

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

FREDDY AVNI, M.D.
(NAME)

1100 Bear Island Drive
(P.O. Box or Mail Drop Box **NOT** ACCEPTABLE)

West Palm Beach, FL 33409
(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.

Freddy Avni
(SIGNATURE)

7.29.96
(DATE)