# 197000004489

October 02, 1996

Department of State, Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

ORLANDO VASCULAR CLINIC OF FLORIDA Re:

Ladies and Gentlemen:

500001964725 -10/04/96--01006--013 \*\*\*\*\*70.00 \*\*\*\*\*70.00

Please find enclosed for filing one original and one copy of the Articles of Incorporation of ORLANDO VASCULAR CLINIC OF FLORIDA. Also enclosed is a check in the amount of \$70.00 as the appropriate filing fee, and a separate check in the amount of \$52.50 for 1 certified copies.

Please return the copy, stamped to show the date of filing, to the undersigned.

Sincerely.

401 W. COLONIAL DR., OPLANDO, FL SUITC H

32804

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505, 618, 502 W96-212

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## FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

October 8, 1996

JOSEPH S. GREGORIUS 401 W. COLONIAL DRIVE ORLANDO, FL 32804 Suite (4)

SUBJECT: ORLANDO VASCULAR CLINIC OF FLORIDA

Ref. Number: W96000021210

We have received your document for ORLANDO VASCULAR CLINIC OF FLORIDA and check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The corporate name must contain a suffix that will clearly indicate that it is a corporation. Such suffixes include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

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 name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Simply adding "of Florida" or "Florida" to the end of an entity name **DOES NOT** constitute a difference. Please select a new name and make the substitution in all appropriate places. One or more words may be added to make the name distinguishable from the one presently on file.

When the document is resubmitted, please return a copy of this letter to ensure that your document is properly handled.

If you have any questions about the availability of a particular name, please call (904) 488-9000.

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) 487-6925.

Brenda Baker Corporate Specialist

Letter Number: 296A00045772



### FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

December 11, 1996

JOSEPH S. GREGORIUS 401 W. COLONIAL DRIVE SUITE 4 ORLANDO, FL 32804

SUBJECT: ORLANDO VASCULAR CLINIC OF FLORIDA Ref. Number: W96000021210

We have received your document for ORLANDO VASCULAR CLINIC OF FLORIDA and check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

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If you have any questions concerning the filing of your document, please call (904) 487-6925.

Brenda Baker Corporate Specialist

Letter Number: 296A00045772

January 01, 1997

Department of State, Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

Re: VASCULAR CLINIC OF ORLANDO INC.

Ladies and Gentlemen:

Please find enclosed for filing one original and one copy of the Articles of Incorporation of VASCULAR CLINIC OF ORLANDO INC. Also enclosed is a check in the amount of \$70.00 as the appropriate filing fee, and a separate check in the amount of \$52.50 for 1 certified copies.

Please return the copy, stamped to show the date of filing, to the undersigned.

Sincerely,

JOSEPH'S. GREGORIUS 401 W. COLONIAL DR., ORLANDO, FL

32804

# ARTICLES OF INCORPORATION

FILED

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

OF

# VASCULAR CLINIC OF ORLANDO INC.

ARTICLE I

The name of the Corporation is VASCULAR CLINIC OF ORLANDO INC.

**ARTICLE II** 

The principal place of business and mailing address of this corporation shall be 401 W. COLONIAL DR. #4, ORLANDO, FL 32804.

ARTICLE III

The aggregate number of shares which the Corporation has authority to issue is 100 shares of common stock with no par value.

#### **ARTICLE IV**

The address of the initial registered office of the Corporation is 401 W. COLONIAL DR., ORLANDO, Florida 32804, and the name of the Corporation's initial registered agent for service of process at such address is JOSEPH S. O'HARA.

#### **ARTICLE V**

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

JOSEPH S. GREGORIUS, 401 W. COLONIAL DR., ORLANDO, FL 32804.

IN WITNESS WHEREOF, I have hereunto set my hand this 9th day of

MY C

COMMIE L. BRESLIN MY COMMISSION & CC477441 EXCERS June 29, 1899 BONDED THRU TRDY FAIN INSURANCE, INC. JOSEPH S. GREGORIUS/

401 W. COLONIAL DR., ØRLANDO, FL 32804

# 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.

- 1. The name of the corporation is: VASCULAR CLINIC OF ORLANDO INC.
- 2. The name of the registered agent and office is:

JOSEPH S. O'HARA 401 W. COLONIAL DR., ORLANDO, Florida 32804

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 PUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

SIGNATURE

DATE