

P970000107069

TRANSMITTAL LETTER

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

100002370211--0
-12/12/97--01018--010
*****70.00 *****70.00

SUBJECT: FLORIDA MULTI SPECIALTY MEDICAL GROUP, PROFESSIONAL ASSOCIATION
(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 ☐ \$78.75 ☐ \$122.50 ☐ \$131.25

FROM: DOTTIE BREWER
Name (printed or typed)
PROFESSIONAL LEGAL ASSISTORS
3121 W. Coast Highway, #8-C
Address
Newport Beach, CA 92663
City, State & Zip
800-621-7008
Daytime Telephone number

FILED
97 DEC 22 PM 12:09
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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

12-22-97



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

December 12, 1997

DOTTIE BREWER
PROFESSIONAL LEGAL ASSISTORS
3121 W COAST HWY, #8C
NEWPORT BEACH, CA 92663

SUBJECT: FLORIDA MULTI SPECIALTY MEDICAL GROUP, A
PROFESSIONAL ASSOCIATION
Ref. Number: W97000027823

We have received your document for FLORIDA MULTI SPECIALTY MEDICAL GROUP, A PROFESSIONAL ASSOCIATION and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with an address and telephone number where you can be reached during working hours.

The only acceptable corporate suffixes for professional associations are PROFESSIONAL ASSOCIATION, P.A., and CHARTERED.

Please return the original and one copy of 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 (850) 487-6928.

Michelle Milligan
Document Specialist

Letter Number: 197A00058613

12-19-97
I have corrected
the articles and
are re-submitting
for filing
Sharko

Fed ex - address
409 E. Gaines St.
Tallahassee, FL 32399

ARTICLES OF INCORPORATION
OF
FLORIDA MULTI SPECIALTY MEDICAL GROUP,
PROFESSIONAL ASSOCIATION

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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be: Florida Multi Specialty Medical Group, professional association.

ARTICLE II PRINCIPAL OFFICE

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

2080 Century Park East, Suite 1704, Los Angeles, California 90067.

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: ten thousand (10,000).

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is: Carol Brannom, 759 South Federal Highway, Suite 319, Stuart, FL 34994.

ARTICLE V PURPOSE OF THIS CORPORATION

The purpose of this corporation is the practice of medicine.

ARTICLE VI INCORPORATOR

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

Dottie Brewer, Professional Legal Assistors, 3121 West Coast Highway, Penthouse 8-C,
Newport Beach, CA 92663.

The undersigned incorporator has executed these Articles of Incorporation this 4th of
December, 1997.

Dottie Brewer

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 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: FLORIDA MULTI SPECIALTY MEDICAL GROUP,
PROFESSIONAL ASSOCIATION

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

CAROL BRANNOM
(Name)
759 S. Federal Highway, #319
(P.O. Box not acceptable)
Stuart, FL 34994
(City/State/Zip)

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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 and accept the obligations of my position as registered agent.

Carol Brannon
(Signature)