

P97000109049

TRANSMITTAL LETTER

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

100002384621--4
-12/29/97--01106--008
****122.50 ****122.50

THE MEDICAL OFFICE OF
SUBJECT: ROBERT JAY DRIMMER 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

FILED
97 DEC 29 PM 12:00
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FROM: JACQUELINE M. ZIEGLER ESQ
Name (printed or typed)

1853 NW 94TH AVE
Address

CORAL SPRINGS FL 33071-8956
City, State & Zip

(954) 344-8209
Daytime Telephone number

Jacqueline Ziegler GAVE

AUTHORIZATION BY PHONE TO
CORRECT P/A Purpose*

DATE 12-31-97

DOC. EXAM. nam

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

ARTICLES OF INCORPORATION
THE MEDICAL OFFICE OF
ROBERT JAY DRIMMER M.D. P.A.

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: **THE MEDICAL OFFICE OF**
ROBERT JAY DRIMMER M.D. P.A.

ARTICLE II PRINCIPAL OFFICE

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

1487 LYONS ROAD
COCONUT CREEK FLA 33063

DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

97 DEC 29 PM 12:00

FILED

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: **1000 SHARES NO PAR VALUE**

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is: **JACQUELINE M. ZIEGLER**
ATTORNEY AT LAW
1853 NW 94TH AVE
CORAL SPRINGS FL 33071-8956

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):

ROBERT JAY DRIMMER 7640 NW 50TH CT
CORAL SPRINGS FL
33067

ARTICLE VI PURPOSE

THE SPECIFIC PURPOSE OF THE CORPORATION IS THE PRACTICE OF MEDICINE.

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

26TH day of DEC, 1997


Signature

Signature

Signature

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: THE MEDICAL OFFICE OF
ROBERT JAY DRIMMER M.D. P.A.
2. The name and address of the registered agent and office is:

JACQUELINE M. ZIEGLER ESQ.
(NAME)

1853 NW 94TH AVE
(P.O. Box or Mail Drop Box **NOT** ACCEPTABLE)

CORAL SPRINGS FL 33071-8956
(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.


(SIGNATURE)

12/26/97
(DATE)

DIVISION OF CORPORATIONS, P. O. BOX 6327, TALLAHASSEE, FL 32314