## CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32302 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

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		Merger File
		Art. of Amend. File
		RA Resignation
		Dissolution / Withdrawal
		Annual Report / Reinstatement
		Cert. Copy
		Photo Copy
		Certificate of Good Standing
		Certificate of Status
		Certificate of Fictitious Name
		Corp Record Search
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Signature		Fictitious Owner Search
Signature		Vehicle Search 3
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#### ARTICLES OF INCORPORATION

OF

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# EZE DAVID UCHE, M.D., P.A.

#### ARTICLE I. NAME

The name of this corporation is EZE DAVID UCHE, M.D., P.A.

#### ARTICLE II. DURATION

This corporation shall begin its existence on the 23rd day of January, 1998.

EFFECTIVE DATE
01-23-98

#### ARTICLE III. PURPOSE

This corporation is organized for the purpose of practicing the profession of medicine under the laws of the United States and the State of Florida.

#### ARTICLE IV. CAPITAL STOCK

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

SEVEN THOUSAND FIVE HUNDRED (7,500) Shares of Common Stock having a Nominal or Par Value of ONE DOLLAR (\$1.00) per share.

#### ARTICLE V. PREEMPTIVE RIGHTS

Every shareholder, upon the sale for cash of any new stock of this corporation of the same kind, class or series as that which he already holds, shall have the right to purchase his pro rata share thereof (as nearly as may be done without issuance of fractional shares) at the price at which it is offered to others.

#### ARTICLE VI. INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office of this corporation is 907 Webster Street, Leesburg, Florida 34748, and the name of the initial registered agent of this corporation is **Stephen**G. Sewell, Esquire.

#### ARTICLE VII. PRINCIPAL OFFICE

The address of the principal office is 700 Doctor's Court, Leesburg, Florida 34748. The preferred mailing address is same.

#### ARTICLE VIII. INITIAL BOARD OF DIRECTORS

This corporation shall have one (1) director, initially. The number of directors may be either increased or diminished from time to time by the By-Laws, but shall never be less than one (1). The name(s) and address(es) of the initial director(s) of this corporation is(are):

NAME

ADDRESS

EZE DAVID UCHE, M.D.

700 Doctors Court Leesburg, Florida 34748

#### ARTICLE IX. INCORPORATOR

The name and address of the person(s) signing these Articles of Incorporation is(are):

NAME

**ADDRESS** 

EZE DAVID UCHE, M.D.

700 Doctors Court Leesburg, Florida 34748

#### ARTICLE X. INDEMNIFICATION

The corporation shall indemnify any officer, director, agent or employee or any former officer, director, agent or employee to the full extent permitted by law.

### ARTICLE XI. AMENDMENT

This corporation reserves the right to amend or repeal any provisions contained in these Articles of Incorporation, or any amendment hereto, and any right conferred upon the shareholders is subject to this reservation.

IN WITNESS WHEREOF, the undersigned subscriber(s) has(have) executed these Articles of Incorporation this 23rd day of January, 1998.

EZE DAVID UCHE, M.D., Subscriber

Eze Uche, mD



## <u>CERTIFICATE OF DESIGNATION</u> <u>REGISTERED AGENT/REGISTERED OFFICE</u>

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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: EZE DAVID UCHE, M.D., P.A.
- 2. The name and address of the registered agent and office is:

STEPHEN G. SEWELL, ESQUIRE 907 Webster Street Leesburg, Florida 34748

SIGNAT	TURE EZE Uche, mi)
	(Corporate Officer)
TITLE _	President
DATE	1-23-98

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 _	Stigh Iswell
DATE	1-23-98