

Document Number

C T CORPORATION SYSTEM

660 East Jefferson Street

Requestor's Name

Tallahassee, Florida 32301

Address

(850) 222-1092

City

State

Zip

Phone

CORPORATION(S) NAME

900002434619--0

-02/19/98--01001--021

*****70.00 *****70.00

Coastal Physician Services of Florida, Inc.

☒ Profit - Ants.

☐ NonProfit

☐ Limited Liability Company

☐ Foreign

☐ Amendment

☐ Dissolution/Withdrawal

☐ Merger

☐ Mark

☐ Limited Partnership

☐ Reinstatement

☐ Limited Liability Partnership

☐ Certified Copy

☐ Annual Report

☐ Fict. Filing

☐ Photo Copies

☐ Call if Problem

☐ Will Wait

☐ Other

☐ Change of R.A.

☐ UCC-1 UCC-3

☐ CUS

☐ Call When Ready

☒ Walk In

☐ Mail Out

☐ After 4:30

☒ Pick Up

Name
Availability

Document
Examiner

Updater

Verifier

Acknowledgment

W.F. Verifier

FEB 18 1998

Please Return Extra Copy(s)
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Thanks, Melanie

DIVISION OF CORPORATION

98 FEB 18 PM 3:59

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CR2E031 (1-89)

State of Florida
Articles of Incorporation
Of

Coastal Physician Services of Florida, Inc.

FIRST: The corporate name that satisfies the requirements of Section 607.0401 is: Coastal Physician Services of Florida, Inc.

SECOND: The street address of the principal office of the corporation and its mailing address is:

2828 Croasdaile Drive, Durham, North Carolina, 27705

THIRD: The number of shares the corporation is authorized to issue is One Hundred Thousand (100,000) each with the par value of One Dollar and No Cents (\$1.00).

FOURTH: The street address of the initial registered office of the corporation is C/O C T CORPORATION SYSTEM, 1200 SOUTH PINE ISLAND ROAD, CITY OF PLANTATION, FLORIDA 33324, and the name of its initial registered agent at such address is C T CORPORATION SYSTEM.

FIFTH: The name and address of each incorporator is:
Connie Bryan, 660 East Jefferson Street, Tallahassee, Florida 32301

The undersigned have executed these articles of incorporation this

Connie Bryan
Connie Bryan, Incorporator

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Acceptance by the Registered Agent of
Coastal Physician Services of Florida, Inc.

as required in Section 607.0501

C T Corporation System is familiar with and accepts the obligations
provided for in Section 607.0505.

C T CORPORATION SYSTEM

Dated February 18, 1998

By Connie Bryan

(Type Name of Officer)
CONNIE BRYAN
SPECIAL ASSISTANT SECRETARY
(Title of Officer)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA