

# P98080050153

## TRANSMITTAL LETTER

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

FILED  
SECRETARY OF CORPORATIONS  
DIVISION OF CORPORATIONS  
98 JUN -3 PM 1:41

**SUBJECT:** SunCoast Medical Services of Tampa Bay, Inc.  
(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**

**FROM:** Denise Clark  
Name (Printed or typed)

5416 Storm Rd  
Address

Lutz, Florida 33549  
City, State & Zip

813-962-1897  
Daytime Telephone number

800002546178--0  
-06/03/98--01071--009  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

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

6-4  
WS

## ARTICLES OF INCORPORATION

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:

SunCoast Medical Services of Tampa Bay, Inc.

### ARTICLE II PRINCIPAL OFFICE

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

5416 Storm Rd  
Lutz, FL 33549

### ARTICLE III SHARES

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

3000

### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

Denise Clark  
5416 Storm Rd  
Lutz, FL 33549

### ARTICLE V INCORPORATOR

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

Denise Clark  
5416 Storm Rd.  
Lutz, FL 33549

Denise Clark

Signature/Incorporator

6-1-98

Date

(An additional article must be added if an effective date is requested.)

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

Denise Clark

Signature/Registered Agent

6-1-98

Date

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