

P9800077116

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

**SUBJECT:** CLAUDE J. KENOL, M.D., P.A.  
(Proposed corporate name - must include suffix)

300002623723--7  
-08/24/98--01138--006  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

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:** CLAUDE J. KENOL, M.D.  
Name (Printed or typed)

3222 Wiles Rd # 155  
Address

Coral Springs, Florida 33067  
City, State & Zip

(954) 307 - 5956  
Daytime Telephone number

DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

98 SEP -4 AM 7:53

FILED

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

98-8-98  
9-3



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State

August 27, 1998

CLAUDE J. KENOL, M.D.  
8222 WILES RD., #155  
CORAL SPRINGS, FL 33067

SUBJECT: CLAUDE J. KENOL, M.D., P.A.  
Ref. Number: W98000019618

We have received your document for CLAUDE J. KENOL, M.D., P.A. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must state the number of shares of authorized stock.

The specific nature of business of the professional association must be stated in the document.

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) 487-6930.

Carolyn Batten  
Document Specialist

Letter Number: 098A00044351

## 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:

CLAUDE J. KENOL, M.D., P.A.

### ARTICLE II PRINCIPAL OFFICE

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

130 9th Street North  
Suite 150  
Naples, Florida 34102

### ARTICLE III SHARES

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

one

### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

CLAUDE J. KENOL, M.D.  
130 9th Street North Suite 150  
Naples, Florida 34102

### ARTICLE V INCORPORATOR

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

CLAUDE J. KENOL, M.D.  
3222 Wiles Rd # 155  
Coral Springs, Florida 33067

### ARTICLE VI - PURPOSE OF CORPORATION

Professional Medical Practice

Claude J. Kenol  
Signature/Incorporator

8-21-98

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.

Claude J. Kenol  
Signature/Registered Agent

8-21-98

Date