## P9900019294 TRANSMITTAL LETTER

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

SUBJECT:	Medical ASS	ociates, Inc		<del>_</del>
	(Proposed corporate	e name - must merude surra,	) : 00002763 -02/03/990 ******70.00	6413 31060011 *****70.00
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 CO	PY REQUIRED\S	9
FROM:	Jeffrey B Name (Prin 100 SE 6 Ad Ff. Laude	Levy  Ited or typed)  Levy  Ited or typed)  Levy  Ited or typed)  Levy  Levy	LAHASSEE, FLORIDA	FILED 99 MAR -2 AH 9: 12
	City, Si	tate & Zip	-	· -
		ZZ-1060 ephone number	- 199	_301

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

of 3/2



## FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

February 5, 1999

JEFFREY B. LEVY 100 SE 6TH ST. FT. LAUDERDALE, FL 33301

SUBJECT: MEDICAL ASSOCIATES, INC.

Ref. Number: W99000003019

We have received your document for MEDICAL ASSOCIATES, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Simply adding "of Florida" or "Florida" to the end of a name is not acceptable. Please select a new name and make the correction in all appropriate places. One or more words may be added to make the name distinguishable from the one presently on file.

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) 487-6878.

Alan Crum Document Specialist

Letter Number: 999A00005267

## ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida

Business Corporation Act, hereby add	opts the following Articles of Incorporation.
ARTICLE: I NAME	Marketing PEG = 1
The name of the corporation shall	be: Medical Associates, Inc.
*	
ARTICLE II PRINCIPAL	L OFFICE S
The principal place of business an	d mailing address of this corporation shall be:
н	3636 W. Oakland Park Blad. PE
4 10 10 10 10 10 10 10 10 10 10 10 10 10	Ft. Landerdole, FL 33311
ARTICLE III SHARES	
The number of shares of stock that	t this corporation is authorized to have outstanding at any one time is:
20 N	ullion shares.
The name and Florida street address  ARTICLE V INCORPOR	EGISTERED AGENT AND STREET ADDRESS ess of the initial registered agent are:  Jeffvey B. Levy  100 SE 6th Street  Ft. Landerd cle, FL 3330    EATOR  corporator to these Articles of Incorporation are:
* * *	Owasu McFarland
• •	Owasu Mc Farlance
•	3636 W. Oakland Park Blvd.
	Ff. Landerdole, FL. 33301
DWFarland	1/27/99
Signature/Incorporato	
Having been named as registered agent certificate, I hereby accept the appoints	and to accept service of process for the above stated corporation at the place designated in this ment as registered agent and agree to act in this capacity. I further agree to comply with the
provisions of all statutes relating to fi obligations of my position as registered	ie proper and complete performance of my duties, and I am familiar with and accept the

Signature/Registered Agent