

P99000021483

Dr. William & Jennifer Hayes
1913 Piccadilly Circle
Cape Coral, FL 33991

941-458-6191

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. _____ (Corporation Name) _____ (Document #)
2. _____ (Corporation Name) _____ (Document #)
3. _____ (Corporation Name) _____ (Document #)
4. _____ (Corporation Name) _____ (Document #)

- ☐ Walk in ☐ Pick up time _____ ☐ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

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-02/22/99--01143--010
*****78.75 *****78.75

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

FILED
99 MAR -9 AM 9:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

B. REGISTER MAR 9 1999

Examiner's Initials

W99-4118



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

February 25, 1999

WILLIAM HAYES
1913 PICCADILLY CIR
CAPE CORAL, FL 33991

SUBJECT: W.A. HAYES, D.O. PA
Ref. Number: W99000004718

We have received your document for W.A. HAYES, D.O. PA and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with an address and telephone number where you can be reached during working hours.

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

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

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) 487-6919.

Beth Register
Corporate Specialist Supervisor

Letter Number: 299A00008743

ARTICLES OF INCORPORATION

OF

W.A. HAYES, D.O. PA

FILED

99 MAR -8 AM 9:07

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida General Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be: W.A. HAYES, D.O. PA

The principal place of business of this corporation shall be: 1913 Piccadilly Circle
Cape Coral Fl 33991

ARTICLE II NATURE OF BUSINESS

This corporation may engage in or transact any or all lawful activities or business permitted under the laws of the United States, the State of Florida, or any other state, country, territory or nation. Medical Office

ARTICLE III CAPITAL STOCK

The aggregate number of shares of stock and its par value that this corporation is authorized to have outstanding at any one time is: 100 shares @ 1.00

ARTICLE IV TERM OF EXISTENCE

This corporation is to exist perpetually.

ARTICLE V OFFICERS DIRECTORS

The name(s) and street address(es) of the initial officer(s) and director(s), if any, who shall hold office the first year of the corporation's existence or until their successor(s) is(are) elected, is(are): William A. Hayes P/D

1913 Piccadilly Circle
Cape Coral Fl 33991

ARTICLE VI INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to this articles of incorporation is(are):

William A. Hayes
1913 Piccadilly Circle
Cape Coral Fl 33991

IN WITNESS WHEREOF, the undersigned incorporator(s) has(have) executed these Articles of Incorporation this 18th day of February, 1999

Signature(s) of Incorporator(s)

[Signature]

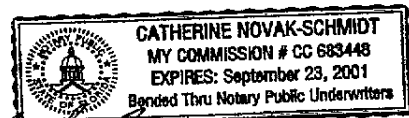
STATE OF FLORIDA
COUNTY OF _____

LEE

THE FOREGOING instrument was acknowledged and sworn to before me this 18
day of February 1999 by William Hayes, C. PA
(Name of incorporator)
of W. A. Hayes, D.O. PA
(Name of Corporation)

Notary Public

[Signature]
My Commission Expires: _____



Known to me personally

(SEAL)

ARTICLES OF INCORPORATION FILING FEE: ~~\$20~~ 35.

CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 607.325, 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: W. A. Hayes, D.O. PA

2. The name and address of the registered agent and office is: William A. Hayes

1913 Piccadilly Circle

(P.O. BOX NOT ACCEPTABLE)

Cape Coral Fl 33991

(CITY/STATE/ZIP)

SIGNATURE

(Corporate officer)

TITLE

President

DATE

2/18/99

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325, FLORIDA STATUTES.

SIGNATURE

DATE

2/18/99

REGISTERED AGENT FILING FEE: ~~\$20.00~~ 35

FILED
MAR - 8 AM 9:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA