

99000049982

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32302  
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

F. Hernandez, m.d. p.a.

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\*\*\*\*\*78.75 \*\*\*\*\*78.75

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99 JUN -3 PM 10:39  
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TALLAHASSEE, FLORIDA

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1999 JUN -3 PM 12:45  
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TALLAHASSEE, FLORIDA

☒ Art of Inc. File Cert  
☐ LTD Partnership File  
☐ Foreign Corp. File  
☐ L.C. File  
☐ Fictitious Name File  
☐ Trade/Service Mark  
☐ Merger File  
☐ Art. of Amend. File  
☐ RA Resignation  
☐ Dissolution / Withdrawal  
☐ Annual Report / Reinstatement  
☒ Cert. Copy  
☐ Photo Copy  
☐ Certificate of Good Standing  
☐ Certificate of Status  
☐ Certificate of Fictitious Name  
☐ Corp Record Search  
☐ Officer Search  
☐ Fictitious Search  
☐ Fictitious Owner Search  
☐ Vehicle Search  
☐ Driving Record  
☐ UCC 1 or 3 File  
☐ UCC 11 Search  
☐ UCC 11 Retrieval  
☐ Courier

Signature

Requested by:

Name

Date

Time

Walk-In

Will Pick Up

R. Purinton

JUN - 3 1999

**ARTICLES OF INCORPORATION  
OF**

**F. HERNANDEZ, M.D., P.A.**

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FILED  
1999 JUN -3 PM 12:45  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

The undersigned, acting as Incorporators, pursuant to Chapter 621 of the Florida Statutes, adopt the following Articles of Incorporation.

**ARTICLE I. NAME**

The name of this Corporation is: F. HERNANDEZ, M.D., P.A.

**ARTICLE II. DURATION**

The period of its duration is perpetual, beginning from the date these Articles are filed with the State of Florida, Secretary of State.

**ARTICLE III. PURPOSE**

The general purpose of the business to be transacted by this Corporation is to engage in any activity or business permitted under the laws of the United States and the State of Florida, and to effectuate such purposes it may act in any capacity including as an agent or attorney-in-fact for any person or entity.

**ARTICLE IV. CAPITAL STOCK**

This Corporation is authorized to issue 10,000 shares of common stock, all of one class, with a stated par value of \$1.00 per share, all of which will all be designated "common shares".

**ARTICLE V. INITIAL PRINCIPAL OFFICE  
AND MAILING ADDRESS OF CORPORATION**

The street address of the initial principal office of this Corporation is: 600 N. Hart Blvd., Orlando, Florida 32818.

The initial mailing address of this Corporation is: 600 N. Hart Blvd., Orlando, Florida 32818.

**ARTICLE VI. INITIAL REGISTERED AGENT  
OF CORPORATION AND ADDRESS OF REGISTERED AGENT**

The name of the initial registered agent of this Corporation is: FERNANDO I. HERNANDEZ, M.D., and the address of this initial Registered Agent is: 600 N. Hart Blvd., Orlando, Florida 32818.

**ARTICLE VII. INITIAL BOARD OF DIRECTORS**

This Corporation will have one (1) director initially. The number of directors may either be increased or diminished from time to time by the Bylaws but will never be less than one (1). The name and address of the initial director of this Corporation is:

Fernando I. Hernandez, M.D.  
600 N. Hart Blvd.  
Orlando, Florida 32818

**ARTICLE VIII. INCORPORATORS**

The name and address of the person signing these Articles as Incorporator is:

Fernando I. Hernandez, M.D.  
600 N. Hart Blvd.  
Orlando, Florida 32818

**ARTICLE IX. BYLAWS**

The power to adopt, alter, amend or repeal Bylaws will be vested in the Board of Directors and the Shareholders.

**ARTICLE X. MANAGEMENT BY SHAREHOLDERS**

All corporate powers will be exercised by or under the authority of, and the business affairs of this Corporation will be managed under the direction of, the shareholders of this Corporation.

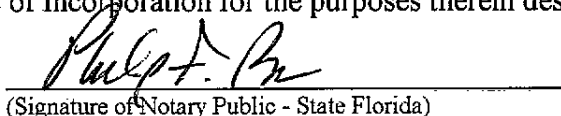
DATED: 6/1/99, 1999.



FERNANDO I. HERNANDEZ, M.D. Incorporator

STATE OF FLORIDA  
COUNTY OF ORANGE

The foregoing instrument was acknowledged before me this 1<sup>st</sup> day of June, 1999, by FERNANDO I. HERNANDEZ, M.D., who is described as Incorporator, and who executed the foregoing Articles of Incorporation, and acknowledged before me that he subscribed to such Articles of Incorporation for the purposes therein described.

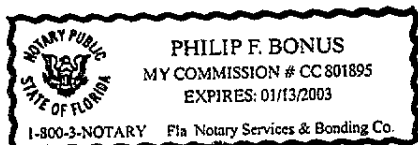


(Signature of Notary Public - State Florida)

(Print, Type, or Stamp Commissioned Name of Notary Public)

Personally Known \_\_\_\_\_ OR Produced Identification X

Type of Identification Produced FL D/L # H655-249-44-243-0



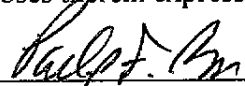
**ACCEPTANCE OF DUTIES OF REGISTERED AGENT**

I HEREBY ACCEPT the designation, duties, and responsibilities as REGISTERED AGENT of F. HERNANDEZ, M.D., P.A., and agree to comply with all provisions of the Florida Statutes, and/or any other applicable laws related thereto.

  
FERNANDO I. HERNANDEZ, M.D.  
Registered Agent

STATE OF FLORIDA  
COUNTY OF ORANGE

The foregoing instrument was acknowledged before me this 1<sup>st</sup> day of June, 1999, by FERNANDO I. HERNANDEZ, M.D., described as the REGISTERED AGENT for F. HERNANDEZ, M.D., P.A., and who executed the foregoing designation as REGISTERED AGENT for the purposes therein expressed.

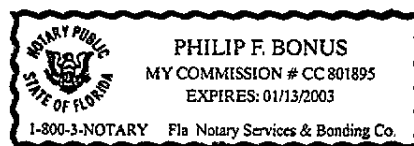
  
(Signature of Notary Public - State Florida)

(Print, Type, or Stamp Commissioned Name of Notary Public)

Personally Known \_\_\_\_\_ OR Produced Identification X

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