

P99000086640

Requestor's Name

A J CHRISTOPHER M.D.  
1045 E OCEAN BLVD  
STUART, FL. 34996

#

20000298882--3  
-09/28/99-01030-004  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

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

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  
1999 SEP 28 PM 2:06  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

1999 SEP 28 PM 2:06

**ARTICLES OF INCORPORATION OF**  
**DR. ALICE J. CHRISTOPHER, P.A.**

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

The Undersigned subscriber to these Articles of Incorporation, a natural person competent to contract and legally authorized to practice the profession of medicine in the State of Florida, hereby proceeds to form a professional corporation in accordance with the Florida Professional Service Corporation Act, and hereby adopts the following Articles of Incorporation for such corporation:

**ARTICLE I. NAME**

The name of this Corporation shall be DR. ALICE J. CHRISTOPHER, P.A.

**ARTICLE II. PURPOSE AND NATURE OF BUSINESS**

The purpose of the Corporation and nature of its business are as follows:

1. To engage in the practice of medicine as a professional service corporation and to provide services incident thereto.
2. To own property, enter into contracts and carry on any activity necessary or incident to the accomplishment or furtherance of the purpose of the Corporation.
3. The services of the Corporation which consist of the practice of medicine, shall be carried out only through the officers, employees and agents who are active members of the Florida Medical Association, in good standing and licensed in Florida to render services of medicine.
4. To do everything necessary, proper or convenient for the accomplishment of any purpose herein set forth, and to do every other act incidental thereto which is not forbidden by the laws of the State of Florida, by the Rules of the Florida Medical Association, or by the provisions of these Articles of Incorporation.

### **ARTICLE III. PRINCIPAL OFFICE AND AGENT**

The principal place of business and mailing address of the corporation shall be 1045 E. Ocean Boulevard, Stuart, Florida 34996, and the name and mailing address of the initial registered agent is John A. Racin, Esquire, 10570 South U.S. Highway One, Suite 300, Port St. Lucie, Florida 34952. The Board of Directors may from time to time move to any other address in the State of Florida, and change the registered agent.

### **ARTICLE IV. CAPITAL STOCK**

The number of shares that this Corporation is authorized to have outstanding at any one time is 100 shares, having a par value of \$1.00 per share. Such shares shall be of a single class of common stock. None of the shares of the Corporation may be issued to anyone other than an individual who is duly licensed to practice medicine in the State of Florida and is an active member of the Florida Medical Association in good standing.

### **ARTICLE V. DURATION**

The Corporation shall have a perpetual existence.

### **ARTICLE VI. SUBSCRIBERS**

The names and addresses of the subscribers, who are the incorporators of the Corporation, each of who is duly licensed in the State of Florida to practice medicine, is as follows:

DR. ALICE J. CHRISTOPHER  
1045 E. Ocean Boulevard  
Stuart, Florida 34996

### **ARTICLE VII. DIRECTORS**

The Corporation shall be managed by a Board of Directors of at least one Director. No person shall serve as a Director of the Corporation unless the person is duly licensed to practice law

and is an active member of the Florida Medical Association in good standing. The Directors shall be elected by the shareholders of the Corporation. The name and address of the initial person(s) to serve as a member of the initial Board of Directors is as follows:

DR. ALICE J. CHRISTOPHER  
1045 E. Ocean Boulevard  
Stuart, Florida 34996

#### **ARTICLE VIII. RESTRAINT OR ALIENATION**

No shareholder may sell or transfer her shares in the Corporation except to another individual who is eligible to be a shareholder of the Corporation under Florida law.

#### **ARTICLE IX. DISQUALIFICATION**

If any officer, shareholder, agent or employee of the Corporation who has been rendering professional services to the public for the Corporation, becomes legally disqualified to render such professional services within the State of Florida or accepts employment that places restrictions or limitations upon her continued rendering such professional services, then the Corporation shall require her to comply with the Florida Professional Service Corporation Act by serving all employment with and financial interest in the Corporation.

#### **ARTICLE X. AMENDMENT**

These Articles of Incorporation may be amended in the manner provided by law.

IN WITNESS WHEREOF, the undersigned subscriber has executed these Articles of  
Incorporation on this 23 day of September, 1999.

  
DR. ALICE J. CHRISTOPHER

STATE OF FLORIDA  
COUNTY OF Martin

BEFORE ME, personally appeared DR. ALICE J. CHRISTOPHER, to me well known and  
known to me to be the person described in and who executed the foregoing, and acknowledged to  
and before me that they executed said instrument for the purposes therein expressed.

WITNESS my hand and seal this 23 day of September, 1999, in the aforesaid  
County and State.

  
NOTARY PUBLIC, STATE OF FLORIDA

☒ personally known  
provided \_\_\_\_\_ as identification



JOHN A RACINE  
My Commission CC511467  
Expires Nov. 26, 1999

**ACKNOWLEDGMENT OF REGISTERED AGENT**

Having been named to accept service of process for the above stated corporation, at places designated in these Articles, I hereby accept to act in this capacity, and agree to comply with the provisions of said Act relative to keeping open said office.

By: \_\_\_\_\_

Registered Agent

FILED  
1999 SEP 28 PM 2:06  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA