Department d Division of **Eproparations** P. O. Box 6327

Tallahassee, FL 32314

\*\*\*\*\*70.00

SUBJECT:

Lourdes Nieves, M.D., P.A.

(Proposed corporate name - must include suffix)

Enclosed is an original and o	one(1) copy of the articles of	incorporation and a check for:
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\$70.00 Filing Fee \$78.75

Filing Fee

& Certificate

**□**\$122.50

\$131.25

Filing Fee

Filing Fee.

& Certified Copy

Certified Copy

& Certificate

# ADDITIONAL COPY REQUIRED

FROM:

Lourdes Nieves, M.D., P.A.

Name (Printed or typed)

4280 Hunting Trail

Address

Lake Worth, FL 33467

City, State & Zip

(561) 641-0400

Paytime Telephone number

Attempted to earl-loundes hasut regun practice yet \*.

R VARNADORE OCT 27 1999

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



### FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

September 17, 1998

LOURDES NIEVES, M.D., P.A. 4280 HUNTING TRAIL LAKE WORTH, FL 33467

SUBJECT: LOURDES NIEVES, M.D., P.A.

Ref. Number: W98000021285

We have received your document for LOURDES NIEVES, M.D., P.A. 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 specific nature of business of the professional association must be stated in the document.

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.

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) 487-6928.

Michelle Milligan Document Specialist

Letter Number: 298A00047134

### 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:

Lourdes Nieves, M.D., P.A.



### ARTICLE II PRINCIPAL OFFICE

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

160 J.F.K. Drive, Suite #203 Atlantis, FL 33462

### ARTICLE III SHARES

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

100

## ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Lourdes Nieves, M.D. 4280 Hunting Trail Lake Worth, FL 33467 OFFICIAL NOTARY SEAL MARILYN A WELLMAN NOTARY PUBLIC STATE OF FLORIDA COMMISSION NO. CC656191 MY COMMISSION EXP. JUNE 17,2001

#### ARTICLE V INCORPORATOR

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

Lourdes Nieves, M.D. 4280 Hunting Trail Lake Worth, FL 33467

Maily HWellman Notary 10-19-99

Signature/Incorporator

Lourdes Nieves, M.D.

10/19/99

Date

10-19-99

(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

Signature/Registered Agent

Lourdes Nieves, M.D.

0/19/99

10-19-99

ARTICLE VI. Specific purpose for a Professional Corporation

The specific purpose of this Professional corporation is Medical Practice of a Pediatrician.