

V71434

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14 FEB 11 PM 4:29

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

C. LEWIS  
FEB 13 2014  
EXAMINER



APPROVED  
AND  
FILED

14 FEB 11 PM 4:29

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

STATE OF FLORIDA  
COUNTY OF SEMINOLE

**I HEREBY CERTIFY** that on this day, before me, an officer duly authorized in the aforesaid State and County, to take acknowledgments, personally appeared **SUREE VYAS, as President of Apopka Family Medicine, Inc.**, to me known to be the person described in or who has produced a driver's license as identification and who executed the foregoing instrument and he acknowledged before me that he executed the same for the uses and purposes therein expressed on behalf of said Corporation.

**WITNESS** my hand and official seal in the County and State last aforesaid this 1st day of January, 2014

*Carolyn Van Sandt*

Carolyn Van Sandt

(Print Name)

Notary Public/State of \_\_\_\_\_  
My Commission Expires:

