

P14000079724

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

SEP 26 2014

T. SCOTT



400263439504

09/25/14--01015--008 **78.75

SEP 25 AM 10:11
DIVISION OF CORPORATE AFFAIRS
SECRETARY OF STATE

BRADLEY P. HERNDON

Attorney at Law

Mailing Address:

Bradley P. Herndon, P.A.
Post Office Box 520
Fort Walton Beach, FL 32549-0520
E-Mail: bherndon@bherndonlaw.com

Office Address:

25 Walter Martin Road, Suite 202
Fort Walton Beach, FL 32548
Phone: (850) 226-6601
Fax: (850) 226-7215

September 24, 2014

Florida Department of State
Division of Corporations
Corporate Filings
2661 W Executive Center Circle
Tallahassee, Florida 32301

VIA FEDEX OVERNIGHT

RE: Articles of Incorporation of Emerald Coast Arrhythmia, P.A.

In reference to the above-mentioned incorporation, enclosed herewith please find the following:

1. Articles of Incorporation of Emerald Coast Arrhythmia, P.A.;
2. Acknowledgment of Registered Agent; and
3. Check in the amount of \$78.75, representing the filing fee, Registered Agent Designation Fee and fee to obtain a certified copy.

Please file the Articles of Incorporation and forward the certified copy of same to me at the mailing address given above.

Thank you for your assistance in this regard. Should you have any questions, please do not hesitate to contact me.

Sincerely,



Brad Herndon

BPH:lh
Enclosures

J:\KALOOSA VASCULAR ASSOCIATES, LLC\EMERALD COAST ARRHYTHMIA\WORKING FILE\DeptState Incorporation\Letter.2014-09-24.wpd

SEP 25 AM 10:11

RECEIVED
DIVISION OF CORPORATIONS
SEP 25 2014

ARTICLES OF INCORPORATION

OF

EMERALD COAST ARRHYTHMIA, P.A.

The undersigned subscribed to these Articles of Incorporation, are natural persons 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 Services Corporation Act, and hereby adopts the following Articles of Incorporation:

ARTICLE I - NAME

The name of the this corporation is **EMERALD COAST ARRHYTHMIA, P.A.**

ARTICLE II - PURPOSE

The purpose of this corporation and the 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 incidental to the accomplishment or furtherance of the purpose of this corporation.
3. The services of this corporation which consist of the practice of medicine shall be carried out only through officers, employees and agents who are licensed in Florida to render medical services.
4. To do everything necessary, proper or convenient for the accomplishment of any of the purposes herein set forth, and to every other act incidental thereto which is not forbidden by the laws of the State of Florida, by the Rules promulgated by the State of Florida or by the provisions of these Articles of Incorporation.

ARTICLE III - CAPITAL STOCK

The Maximum number of shares of stock that the 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.

ARTICLE IV - DURATION

The corporation shall have perpetual existence.

13 SEP 25 AM 10:11
DIVISION OF REVENUE
TAXATION

ARTICLE V - ADDRESS AND AGENT

The street address of the initial principal office of this corporation is **129 E. Redstone Avenue, Crestview, Florida 32539**, and the name and address of the initial registered agent of the this corporation is **Stephen Burgess, Warren Averett CPAs and Advisors, 316 S. Baylen Street, Suite 300, Pensacola, Florida 32502**. The Board of Directors may from time to time move the office to any other address in the State of Florida and change the registered agent.

ARTICLE VI - DIRECTORS

The corporation shall be managed by a Board of Directors of at least one (1) Director. No person shall serve as a Director of the corporation unless the person is duly licensed to practice medicine in the State of Florida. The Director shall be elected by the shareholders of the Corporation. The name and street address of each person who is to serve as a member of the Initial Board of Directors is as follows:

NAME	ADDRESS
SANTO MARCUS BORGANELLI, M.D.	129 E. Redstone Avenue, Suite A Crestview, Florida 32539

ARTICLE VII - SUBSCRIBER/SHARES

The name and address of the subscribers, who are the incorporators of this corporation, each of whom is duly licensed in the State of Florida to practice medicine are as follows:

NAME	SHARES	ADDRESS
SANTO MARCUS BORGANELLI, M.D.	100	129 E. Redstone Avenue Suite A Crestview, Florida 32539

ARTICLE VIII - RESTRAINT ON ALIENATION

No shareholder may sell or transfer his or her shares in the corporation except to another individual who is eligible to be a shareholder of the corporation under Florida law and subject to the terms contained in the By-Laws of said corporation.

ARTICLE IX - DISQUALIFICATION

If any officer, shareholder, agent or employee of the corporation who has been rendering professional service to the public for the corporation becomes legally disqualified to render such professional services within Florida or accepts employment that places restrictions or limitations upon his or her continued rendering of such

professional services, then the corporation shall require him or her to comply with the Florida Professional Services Corporation Act by severing 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, this 24 day of September, 2014.


SANTO MARCUS BORGANELLI, M.D.

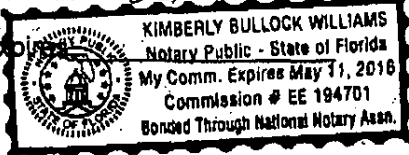
STATE OF FLORIDA
COUNTY OF OKALOOSA

BEFORE ME, a notary public authorized to take acknowledgments in the State and County set forth above, personally appeared **SANTO MARCUS BORGANELLI, M.D.**, who is personally known to me or who produced _____ as identification, and who did/did not take an oath, and known by me to be the person who executed the foregoing Articles of Incorporation and said person acknowledged before me that he executed those Articles of Incorporation for the uses and purposes therein contained.

IN WITNESS WHEREOF, I have hereunto set my hand and seal in the State and County aforesaid this 24 day of September, 2014.

(SEAL)


NOTARY PUBLIC
My Commission Expires



SEP 25 AM 10:11
DIVISION OF REVENUE
STATE OF FLORIDA

ACKNOWLEDGMENT OF REGISTERED AGENT

Certificate Designating Place of Business or Domicile for the Service of Process Within this State, Naming Agent upon Whom Process May be Served:

In pursuance of Chapter 48.091, Florida, Statutes, the following is submitted in compliance with said Act:

FIRST: That **EMERALD COAST ARRHYTHMIA, P.A.**, a corporation duly organized and existing under the Laws of the State of Florida with its principal office as indicated in the Articles of Incorporation at Crestview, Florida, has named **Stephen Burgess, Warren Averett CPAs and Advisors, 316 S. Baylen Street, Suite 300, Pensacola, Florida 32502**, as its agent to accept service of process for the above-named corporation at the place designated in this certificate.

SECOND: Having been named to accept service of process for the above-named 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 performance of my duties.

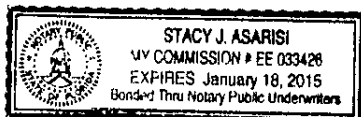


STEPHEN BURGESS
Registered Agent

STATE OF FLORIDA
COUNTY OF ESCAMBIA

SWORN TO AND SUBSCRIBED before me by **STEPHEN BURGESS**, who is personally known to me and who did/did not take an oath, this 24 day of **September, 2014**.

(SEAL)





NOTARY PUBLIC

My Commission Expires: Jan 18, 2015

SEP 25 AM 10:11

RECEIVED
DIVISION OF REVENUE
SEP 25 2014