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N CULLIGAN DEC 3 0 2019 CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195		
REFERENCE: 116066 7354150		
AUTHORIZATION: Spullice man		
COST LIMIT: \$ 78.75		
ORDER DATE : December 27, 2019		
ORDER TIME : 3:04 PM		
ORDER NO. : 116066-005		
CUSTOMER NO: 7354150		
DOMESTIC FILING		
NAME: FLORIDA TELEHEALTH MEDICAL GROUP, P.A.		
EFFECTIVE DATE:		
XX ARTICLES OF INCORPORATION CERTIFICATE OF LIMITED PARTNERSHIP ARTICLES OF ORGANIZATION		
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:		
XXCERTIFIED COPYPLAIN STAMPED COPYCERTIFICATE OF GOOD STANDING		
CONTACT PERSON: Roxanne Turner - EXT.		
EXAMINER'S INITIALS:		

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ARTICLES OF INCORPORATION SECRETARY OF STATE OF TALLAHASSEE, FL FLORIDA TELEHEALTH MEDICAL GROUP, P.A.

The undersigned, acting as incorporator of a professional service corporation being formed under the Professional Service Corporation and Limited Liability Company Act, Chapter 621, Florida Statutes, and the Florida Business Corporation Act, Chapter 607, Florida Statutes, adopts the following articles of incorporation:

ARTICLE I Name

The name of the corporation is Florida Telehealth Medical Group, P.A. (the "Corporation").

ARTICLE II Principal Office and Mailing Address

The Corporation's mailing address and principal place of business is:

3921 Alton Road Suite 418 Miami Beach, FL 33140

ARTICLE III Nature of Business

The purpose of the Corporation is to engage in the practice of medicine through its duly licensed officers, employees, and agents, perform all activities appropriate to the rendition of such services and own property and invest its funds as authorized by applicable Florida law.

ARTICLE IV Capital Stock

The Corporation shall have authority to issue One Thousand (1,000) common shares with a par value of \$.01 per share.

ARTICLE V Initial Registered Agent and Office

The street address of the Corporation's initial registered office is 1201 Hays St, Tallahassee, FL 32301, and the name of the Corporation's initial registered agent at that address is Corporation Service Company.

ARTICLE VI Incorporator

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The name and address of the incorporator is	S:	
<u>Name</u>	<u>Address</u>	
Alex Jovanovich, M.D.	3921 Alton Road Suite 418 Miami Beach, FL 33140	
I submit this document and affirm that that any false information submitted in a document third degree felony as provided in s.817.155, F.S. Dated this 27th day of December, 2019.	The facts stated herein are true. I am aware ment to the Department of State constitutes and Alex Jovanovich, M.D. Incorporator	
ACCEPTANCE BY REGISTERED AGENT		
Corporation at the place designated herein, I am registered agent and agree to act in this capacity.	accept service of process for the above stated familiar with and accept the appointment as	
Dated this day of, 20		
	CORPORATION SERVICE COMPANY	
	Print Name: Roxanne Turner Asst. Vice President Title:	