Mariner Square

Richard S. Amari Kohn Bennett Bradly Roger Bettin, Sr. Charles G. Crawford Mitchell S. Goldman J. Wesley Howze David R. Martin Stephen C. Mays Matthew J. Monaghan Kendall T. Moore Mark N. McQuagge Mark S. Peters David M. Presnick

Reply to: Cocoa Post Office Box

96 Willard Street, Suite 302 Post Office Box 1807 Cocoa, Florida 32923-1807 Telephone (321) 639-1320 Fax (321) 639-6690

Imperial Plaza Suite B104 6769 N. Wickham Road Melbourne, Florida 32940 Telephone (321) 259-6611 Fax (321) 259-6624

James S. Theriac, III Of Counsel Mary E. Lytle, P.A.

Charles R. Steinberg

October 31, 2001

Secretary of State Division of Corporations Post Office Box 6327 Tallahassee, Florida 32314

RE: Dermatology Associates of Brevard, LLLP

· Dear Sir or Madam:

Enclosed for filing is the original and one copy of the proposed Certificate of Limited Partnership for the above named limited partnership, Affidavit of Capital Contribution, Statement of Qualification as a LLLP; Acceptance of Registered Agent, and a check in the amount of \$1,862.50 to cover the following:

> Filing Fee Certified copy of Certificate of Limited Partnership with Affidavit of Capital Contribution Statement of Qualification as a LLLP Registered Agent Designation

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-11/01/01--01038--001

***1862.50 ***1837.50

After these documents have been filed, please return a certified copy to the undersigned at the post office box noted above. If you have any questions concerning the foregoing, please call.

M. Rusmal AVI-1485
Presnick

Enclosures

Dermatology Associates of Brevard, LLLP (w/o enc) cc:

CERTIFICATE OF LIMITED PARTNERSHIP OF DERMATOLOGY ASSOCIATES OF BREVARD, LLLP

The undersigned, desiring to form a limited partnership in accordance with the Florida Revised Uniform Limited Partnership Act and being duly sworn does certify as follows:

	·
1.	The name of the limited liability limited partnership is: <u>DERMATOLOGY ASSOCIATES OF BREVARD, LLLP</u>
2.	The business address of the limited liability limited partnership is:
	1286 South Florida Avenue, Rockledge, Florida 32955
3.	The name of the Registered Agent of the limited liability limited partnership is:
	RICHARD C. KIRKPATRICK
4.	The Florida street address of the Registered Agent for Service of Process is:
	1286 South Florida Avenue, Rockledge, Florida 32955
	Ruhard C Weget
5.	By signing here I agree to accept designation as
	Registered Agent for Service of Process.
6.	Registered Agent for Service of Process. The mailing address of the limited liability limited partnership is: 1286 South Florida Avenue, Rockledge, Florida 32955 The latest date upon which the limited liability limited partnership is To The
	1286 South Florida Avenue, Rockledge, Florida 32955
7.	The latest date upon which the limited liability limited partnership is to the dissolved is:
	<u>December 31, 2031</u>
8.	Names and addresses of the general partners:
	RICHARD C. KIRKPATRICK
	1286 South Florida Avenue, Rockledge, Florida 32955
	MARIO J. SEQUEIRA

Under penalties of perjury we declare that I have read the foregoing and know the contents thereof and the facts stated herein are true and correct.

1286 South Florida Avenue, Rockledge, Florida 32955

Signed this 31st day of October, 2001.

GENERAL PARTNERS:

RICHARD C KIRKPATRICK

MARIO J. SEQUEIRA

)| NOV -| PM 5: ;

AFFIDAVIT OF CAPITAL CONTRIBUTION

The undersigned, being both General Partners of **DERMATOLOGY ASSOCIATES OF BREVARD**, LLLP, a Florida limited liability limited partnership, hereby certifies that the limited partners of the Partnership have contributed certain property to the Partnership, the value of which is Two Hundred Thousand and 00/100 Dollars (\$200,000.00). The total amount contributed and anticipated to be contributed is Ten Million and 00/100 Dollars (\$10,000,000.00).

Signed this 31st day of October, 2001.

FURTHER AFFIANT SAYETH NOT.

Under the penalties of perjury we declare that we have read the foregoing and know the contents thereof and that the facts stated herein are true and correct.

GENERAL PARTNERS:

RICHARD C. KIRKPATRICK

1 James acking

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ECRETARY OF STATE