

1201 HAYS STREET
TALLAHASSEE, FL 32301

800-342-8086

A95000001516



ACCOUNT NO. : 072100000000

REFERENCE : 704392 87551A

AUTHORIZATION : *Patricia Pizub*

COST LIMIT : \$ 87.50

ORDER DATE : October 9, 1995

ORDER TIME : 8:42 AM

ORDER NO. : 704392

CUSTOMER NO: 87551A

CUSTOMER: Mr. Jennifer Van Haitma
LAWRENCE B. JURAN, PA

Suite 100
1200 Corporate Center Way
Wellington, FL 33414

*File
Stn*

300001603883

DOMESTIC FILING

NAME: ABERDEEN I MEDICAL EQUITY
INVESTORS, LTD.

ARTICLES OF INCORPORATION
XX CERTIFICATE OF LIMITED PARTNERSHIP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Karen B. Rozar

EXAMINER'S INITIALS: *hkc*

RECEIVED
95 OCT -9 AM 10:13
CORPORATION
FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 OCT -9 PM 4:47

10/4/95

CERTIFICATE OF LIMITED PARTNERSHIP OF
ABERDEEN I MEDICAL EQUITY INVESTORS, LTD.

FILED STATE
SECRETARY OF CORPORATIONS
95 OCT -9 PM 4:47

The undersigned certifies as follows with respect to
Aberdeen I Medical Equity Investors, Ltd., a limited partnership to
be formed under the laws of the State of Florida:

1. Name of Partnership. The name of the Partnership is
Aberdeen I Medical Equity Investors, Ltd.

2. Office; Agent. The address of the office of the
Partnership is 1200 Corporate Center Way, Suite 100, Wellington, FL
33414. The name and address of the agent for service of process is
Dasco Development Corporation, 1200 Corporate Center Way, Suite
100, Wellington, Florida 33414.

3. General Partner. The name of the sole General Partner is
Aberdeen I Medical Equity Corporation, a Florida corporation, 1200
Corporate Center Way, Suite 100, Wellington, FL 33414, and its
business is acting as General Partner of the Partnership.

4. Mailing Address. The mailing address of the Partnership
is 1200 Corporate Center Way, Suite 100, Wellington, FL 33414.

5. Termination. The latest date on which the Partnership is
to dissolve is December 31, 2096.

ABERDEEN I MEDICAL EQUITY CORPORATION, a
Florida corporation, General Partner

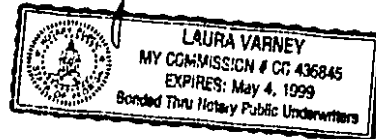
By: Donald A. Sands
Donald A. Sands, Vice President

STATE OF FLORIDA)
COUNTY OF PALM BEACH) SS

Be it known that on the 24th day of September, 1995
before me, a duly authorized notary in and for the State and County
aforesaid, personally came Donald A. Sands, Vice President of
Aberdeen I Medical Equity Corporation, a Florida corporation. He
is personally known to me and did not take an oath.

Laura Varney
Notary Public

My Commission Expires:



AFFIDAVIT

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 OCT -9 PM 4:47

STATE OF FLORIDA)
) SS
COUNTY OF PALM BEACH)

The undersigned, Donald A. Sands ("Affiant"), being first duly cautioned and sworn, deposes and says that:

1. Affiant is the Vice President of Aberdeen I Medical Equity Corporation, a Florida corporation, which is the sole general partner of Aberdeen I Medical Equity Investors, Ltd. (the "Partnership"), a limited partnership formed under the laws of the State of Florida.

2. In connection with the formation of the Partnership, Affiant hereby declares that the capital contributions of the limited partners are anticipated to total \$1,000.

FURTHER AFFIANT SAYETH NAUGHT.

IN WITNESS WHEREOF, the undersigned, on behalf of the Partnership, has set his hand and seal this 24th day of September, 1995.

Donald A. Sands
Donald A. Sands, Vice President

STATE OF FLORIDA)
) SS
COUNTY OF PALM BEACH)

Subscribed, sworn to and acknowledged before me this 24th day of September, 1995 by Donald A. Sands, in his capacity as Vice President of Aberdeen I Medical Equity Corporation, a Florida corporation. He is personally known to me and did not take an oath.

Laura Varney
Notary Public

My Commission Expires:

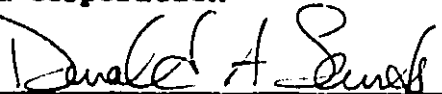


ACCEPTANCE OF REGISTERED AGENT

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED LIMITED PARTNERSHIP 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 SECTION 607.0505 FLORIDA STATUTES AND 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.

Registered Agent:
DASCO Development Corporation, a
Florida corporation

By:


Donald A. Sands, President

FILED STATE
SECRETARY OF CORPORATIONS
DIVISION OF CORPORATIONS
95 OCT -9 PM 4:47

FILE ON OR BEFORE DECEMBER 31, 1996 OR PARTNERSHIP
WILL BE SUBJECT TO REVOCATION AND \$600 PENALTY FEE

LIMITED PARTNERSHIP
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED

95 DEC 27 PM 3:23

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. Name of Limited Partnership

1a. DOCUMENT #
A95000001516

Aberdeen I Medical Equity Investors, Ltd

Mailing Address

1200 Corporate Center Way
Suite 100
West Palm Beach, FL 33414

Principal Office Address

1200 Corporate Center Way
Suite 100
West Palm Beach, FL 33414

If above addresses are incorrect in any way, line through the incorrect information and enter correct address in Block 2 and/or 2a

3. Date Formed or Registered to Do Business in
FLORIDA

10-9-95

3a. Date of Last Report

4. State or Country of Formation

FL

5a. Capital Contributions as Shown
on Record

1,000

5b. Amount of Capital Contributions in
FLORIDA to date

6. FEI Number

Applied For
Not Applicable

7. CERTIFICATE OF STATUS REQUIRED ☒

8. FEES: 1.) Filing Fee: Computed at a rate of \$7 per \$1,000 on amount entered in 5b or 5a if 5b blank, with a minimum filing fee of \$52.50 and a maximum of \$437.50
2.) Supplemental Fee: \$138.75 (pursuant to section 607.193, F.S.)
THE AMOUNT DUE SHALL BE NO LESS THAN \$101.25 (\$52.50 + \$138.75) AND NO MORE THAN \$576.25 (\$437.50 + \$138.75)
Note: If the amount entered in 5b is greater than amount entered in 5a, a supplemental affidavit must be submitted along with a separate and appropriate filing fee.
MAKE CHECK PAYABLE TO FLORIDA DEPT. OF STATE.

9. Name and Address of Current Registered Agent

Dasco Development Corporation
1200 Corporate Center Way
Suite 100
West Palm Beach, FL 33414

10. If changed, new Registered Agent/Office

Name

Street Address (P.O. Box Number is Not Acceptable)

Suite, Apt. # etc

City

FL

Zip Code

10a. Pursuant to the provisions of sections 620.1051 and 620.192, Florida Statutes, the above-named limited partnership organized or registered under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by its general partner(s). I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of section 620.192, Florida Statutes.

SIGNATURE (Registered Agent Accepting Appointment)

A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY
MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.

11. Name(s) of General Partner(s)

Aberdeen I Medical
Equity Corporation

11a. Address of Each General Partner
(Do NOT Use Post Office Box Numbers)

1200 Corporate Center Way
Suite 100

11b. City, State & Zip Code

Wellington, FL 33414

11c. Registration/
Document Number

P45000077286

\$200.00

Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

12. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effects as if made under oath. I further certify that I am a General Partner of the limited partnership, receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes.

SIGNATURE

Typed or Printed Name of General Partner Signing Form

Donald A. Sands VP

Telephone Number

DATE

12-14-95

CR2E003 (6/95)