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Division of Corporations

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FLORIDA LIMITED PARTNERSHIP

Podicare of Santa Ana, Ltd.

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**CERTIFICATE OF LIMITED PARTNERSHIP  
OF  
PODICARE® OF SANTA ANA, LTD.**

The undersigned, as the sole general partner, desiring to form a limited partnership pursuant to the Florida Revised Uniform Limited Partnership Act (1986) as set forth in Chapter 620, §§620.101-620.192 of the Florida Statutes, hereby states the following:

**ARTICLE I.**

**Name of the Limited Partnership**

The name of the Limited Partnership is as follows:

**PODICARE® OF SANTA ANA, LTD.**

**ARTICLE II.**

**Address of the Limited Partnership**

The address of the office of the Limited Partnership is as follows:

1815 Griffin Road, Suite 203  
Dania, Florida 33004

**ARTICLE III.**

**Registered Agent and Registered Office**

The name and address of the agent for service of process on the Limited Partnership is as follows:

GEORGE POLLACK  
1815 Griffin Road, Suite 203  
Dania, Florida 33004

Jeffrey L. Cohen, Esq. (Florida Bar #703966)  
Strawn, Monaghan & Cohen, P.A.  
54 Northeast Fourth Avenue  
Delray Beach, FL 33483  
(561) 278-9400

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**ARTICLE IV.**

**General Partner**

The name and business address of the sole general partner is as follows:

L 96 000 000 701  
Podicare® Medical, L.C.  
1815 Griffin Road, Suite 203  
Dania, Florida 33004

**ARTICLE V.**

**Mailing Address of the Limited Partnership**

The mailing address of the Limited Partnership is as follows:

1815 Griffin Road, Suite 203  
Dania, Florida 33004

**ARTICLE VI.**

**Term of the Limited Partnership**

The term for which the Limited Partnership is to exist is until December 31, 2048, unless sooner dissolved by written consent.

IN WITNESS WHEREOF, this Certificate of Limited Partnership has been executed by the sole general partner of PODICARE® OF SANTA ANA, LTD. as of March 1, 1999.

General Partner:

By : PODICARE® MEDICAL, L.C., a Florida  
limited liability company, its general partner

By:   
Jeffrey L. Galitz, M.D., D.P.M., Manager

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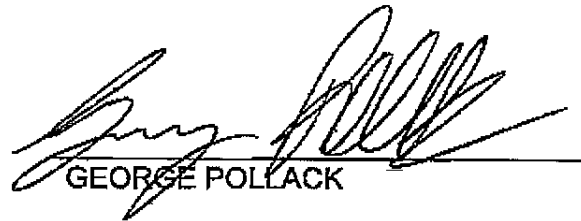
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**ACCEPTANCE OF APPOINTMENT AS REGISTERED AGENT**

Having been named as registered agent for **PODICARE® OF SANTA ANA, LTD.**, a Florida limited partnership (the "Limited Partnership") in the foregoing Certificate of Limited Partnership, the undersigned, on behalf of the Limited Partnership, hereby agrees to accept service of process for the Limited Partnership and to comply with any and all statutes relative to the complete and proper performance of the duties of registered agent.

March 1st, 1999

  
GEORGE POLLACK

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**AFFIDAVIT OF CAPITAL CONTRIBUTIONS**

STATE OF FLORIDA                     )  
   ) SS:  
 COUNTY OF BROWARD                )

The undersigned, Jeffrey L. Galitz, M.D., D.P.M., as President and a Manager of PODICARE® MEDICAL, L.C. being first duly sworn, certifies as follows:

1. The undersigned is the sole general partner of **PODICARE® OF SANTA ANA, LTD.**, a Florida limited partnership, hereinafter referred to as the "Limited Partnership."

2. The amount of capital contributions to the Limited Partnership made by the Limited Partners is \$ 1000.00.

3. The amount of capital contribution anticipated to be contributed by the Limited Partners (in excess of the amount set forth in 2 above) is \$ 1000.00.

FURTHER AFFIANT SAYETH NOT.

Under penalties of perjury the undersigned declares that he has read the foregoing and the facts alleged are true, to the best of his knowledge and belief.

General Partner

PODICARE® MEDICAL, L.C., a Florida limited liability company

By: 

Jeffrey L. Galitz, M.D., D.P.M., as President and a Manager

SWORN TO AND SUBSCRIBED before me this 10<sup>th</sup> day of March, 1999, by Jeffrey L. Galitz, M.D., D.P.M., as President and a Manager of Podicare® Medical, L.C., who is personally known to me or who has produced \_\_\_\_\_ as identification.

NOTARY PUBLIC:

Sign: 

Print: Susan J. Mahns

State of Florida

My Commission Expires:

JLL/dar February 26, 1999

K:\-otherc\61904\CALIFORN\Santa Ana\CERTLTDP.02-26



SUSAN J. MAHNS  
 My Comm Exp. 3/02/2001  
 Bonded By Service Ins  
 No. CC625871  
 Personally Known 11 Omar I.D.

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