F98000	005959
Requestor's Name Address City/State/Zip Phone #	8000026715583 -10/23/9801086008 *****78.75 ******78.75
CORPORATION NAME(S) & DOCUMENT NU	Office Use Only UMBER(S), (if known):
(Corporation Name)	Document #) Branchon, Inc. \$10/27
3. (Corporation Name)	(Document #) 98 VISION OF THE TARY S (Document #) 23 A
4. (Corporation Name) Walk in Pick up time	(Document #) Certified Copy
Mail out	and the second second
Profit Amendment NonProfit Resignation of R.A., Officer/D Limited Liability Change of Registered Agent Domestication Dissolution/Withdrawal	Director 23 TH TO THE TOTAL THE TOTA
Other Merger OTHER FILINGS: Annual Report OUALIFICATION	Requested date Reguested scient
Fictitious Name Name Reservation Foreign Limited Partnership Reinstatement Trademark	Submission
Other	Examiner's Initials



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

PECE VED

98 OCT 27 AM 8: 52

DIVISION OF CORPORATION

October 26, 1998

FLORIDA FILING SEARCH

SUBJECT: DERMATOLOGY PARTNERS OF BRANDON, INC.

Ref. Number: W98000024181

DIVISION OF COST CHATTON

We have received your document for DERMATOLOGY PARTNERS OF BRANDON, INC. and your check(s) totaling \$78.75. However, the document has not been filed and is being retained in this office for the following:

A photocopy of the certificate of existence is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6097.

Michael Mays Document Specialist

Letter Number: 598A00052430

98 DCT 26 PH 1: 42

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1 Dermatol	ogy Partners of Brandon, Inc	RATED". "COMPANY", "CORPORATION"	or words	OF
	ration: must include the word "INCORPO like import in language as will clearly indi craship if not so contained in the name at pr			•
2. Delaware (State or country	under the law of which it is incorporated)	3. (FEI number, if applical	ole)	
		5 perpetual		
4. <u>October</u> (Date	6 1998 of incorporation)	Duration: Year corp. will cease to exist of	ж °регреп	naj.)
' UPON	DUALIFI CATION			
6. Date first	ransacted business in Florida. (SEE SECTIO	NS 607.1501, 607.1502, AND 817.155, F.S.)	98 (DIVISION
7 3507 Fr	ontage Road, Suite 180		<u> </u>	
	Florida 33607		23	PA PA
		iling address)	3	
	· .		က်	Ę.,
8 Medical	Sarvicas		±-	
(Purpose(s) of	exporation authorized in home state or cou	ntry to be carried out in the state of		SHO E
acceptable)	NRAI SERVICES, INC.	ed agent: (P.O. Box or Mail Drop B	<u></u>	
Office Address	526 E. PARK AVE.	· ·		
	TALLAHASSEE	Florida, 32301	-	•
10. Registere	d agent's acceptance:	(CAP COLLY)	·	
registered age	the place designated in this applic nt and agree to act in this capacity ative to the proper and complete p obligations of my position as regi	ccept service of process for the above cation, I hereby accept the appointme c. I further agree to comply with the p erformance of my duties, and I am fai stered agent.	rovisior	ıs of ith
	Ollanie Lur (Registered	agent's signature)	,	
daliroan A	ithia nachcation in the Henzitinelli	henticated, not more than 90 days price of State, by the Secretary of State or the jurisdiction under the law of whi	~~.~.	

OCT 16 '98 16:53 FR M.D.C&K HOUSTON 713 225 7047 TO 549#449458#@#181 P.02/03

incorporated.

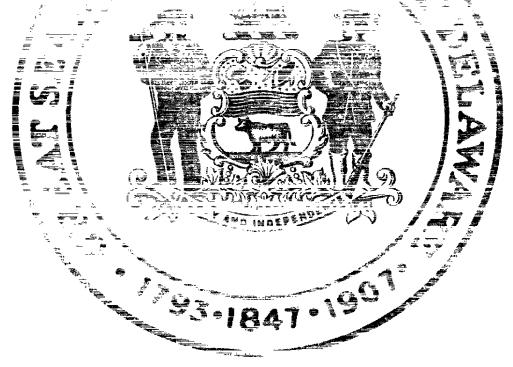
NOT a	and addresses of officers and/or directors: (Street address ONLY-P. O. acceptable) CTORS (Street address only-P. O. Box NOT acceptable)		
Chairman: _			
Address:			
Vice Chairm	an:		
Address:		-	
Director:	A. Keith Henthorne		
Address:	3507 Frontage Road, Suite 180.		
21441000,	Tampa, Florida 33607		
Director:	Thomas C. Dircks		
Address:	3507 Frontage Road, Suite 180		0
7001C35	Tampa, Florida 33607	98	NS:
B. OFFICI	CRS (Street address only-P. O. Box NOT acceptable)	DCT 23	ON CF
President: _	A. Keith Henthorne		<u> </u>
Address:	3507 Frontage Road, Suite 180	<u> </u>	_공유
	-Tampa, Florida 33607	بغ	_2≥
Secretar Vice Preside	nt: Alan L. Weiner	ف	<u> </u>
Address:	3507 Frontage Road, Suite 180		<i></i>
	Tampa, Florida 33607	•	
Assistant Secretary: _	Jeff R. Casey		•
Address:	3507 Frontage Road, Suite 180		
Assistant	Tampa, Florida 33607		
Secretary Treasurer:	Michael P. Bell		
Address: _	3507 Frontage Road, Suite 180		
NOTE: If a	Tampa, Flor1da 33607. necessary, you may attach an addendum to the application listing additio for directors.	nal	•
13.	greature of Chairman, Vice Chairman, or any officer listed in number 12 of the application	<u>.</u>	
•	Keith Henthorne (Typed or printed name and capacity of person signing application)		·. ·

State of Delaware

Office of the Secretary of State

PAGE 1

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "DERMATOLOGY PARTNERS OF BRANDON, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-THIRD DAY OF OCTOBER, A.D. 1998.



DIVISION OF CORPORATIONS

98 OCT 23 AM 9: 49



Edward J. Freel, Secretary of State

2956460 8300 AUTHENTICATION:

9368981

DATE:

10-23-98

981409068