

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32302
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

PO00000001285

less Spinal & Medical
Centers, Inc

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*****70.00 *****70.00

- Art of Inc. File
- LTD Partnership File
- Foreign Corp. File
- L.C. File
- Fictitious Name File
- Trade/Service Mark
- Merger File
- Art. of Amend. File
- RA Resignation
- Dissolution / Withdrawal
- Annual Report / Reinstatement
- Cert. Copy
- Photo Copy
- Certificate of Good Standing
- Certificate of Status
- Certificate of Fictitious Name
- Corp Record Search
- Officer Search
- Fictitious Search
- Fictitious Owner Search
- Vehicle Search
- Driving Record
- UCC 1 or 3 File
- UCC 11 Search
- UCC 11 Retrieval
- Courier

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

00 JAN -5 PM 2:07

APPROVED
AND
FILED

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

00 JAN -5 PM 12:48

RECEIVED

Signature

Requested by:

Name

Date

Time

Walk-In

Will Pick Up

SW
1/5

ARTICLES OF INCORPORATION
OF
HESS SPINAL & MEDICAL CENTERS, INC.

The undersigned incorporator, for the purpose of forming a corporation under Florida General Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I. NAME

The name of the corporation shall be:

HESS SPINAL & MEDICAL CENTERS, INC.

The principal place of business of this corporation shall be:

566 BAY ESPLANADE, CLEARWATER, FL 33767

The mailing address of this corporation shall be:

566 BAY ESPLANADE, CLEARWATER, FL 33767

ARTICLE II. NATURE OF BUSINESS

This corporation may engage in or transact any or all-lawful activities of business permitted under the laws of the United States, the State of Florida, or any other state, country, territory or nation.

SECRETARY OF STATE
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AND
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ARTICLE III. CAPITAL STOCK

The maximum number of shares of that this corporation is authorized to have outstanding at any one time is 10,000 shares of common stock has \$1.00 per value per share.

ARTICLE IV. TERM OF EXISTENCE

The corporation is to exist perpetually.

ARTICLE V. OFFICERS DIRECTORS

This corporation is to have one director and one officer initially. The name and street address of the initial director and officer who shall hold office for the first year of the corporation's existence, or until his successors is elected or appointed is:

***Dr. Stephen T. Hess
President***

***566 Bay Esplanade
Clearwater, FL 33767***

ARTICLE VI. INCORPORATOR

The name and street address of the incorporator to the Articles of Incorporation is:

Dr. Stephen T. Hess

***566 Bay Esplanade
Clearwater, FL 33767***

IN WITNESS WHEREOF, the under signed incorporator has executed these Articles of Incorporation this 16th day of DECEMBER, 1999.

Signature of Incorporator

Dr. Stephen T. Hess
Incorporator

STATE OF FLORIDA
COUNTY OF PINELLAS

THE FOREGOING instrument was acknowledge and sworn to before me this 16 day of DECEMBER, 1999, by DR. STEPHEN T. HESS of HESS SPINAL & MEDICAL CENTERS, INC.

PRODUCED FL. DRIVER LIC.
H200 798 69011-0

Notary Public

Dori A. Lindsley



Dori A. Lindsley
Commission # CG 821541
Expires Apr. 15, 2003
Bonded Thru
Atlantic Bonding Co., Inc.

CERTIFICATE DESIGNATING

REGISTERED AGENT / REGISTERED OFFICE

Pursuant to the provision of Section 607.325, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office / registered agent, in the State of Florida .

1. The name of the corporation is:

HESS SPINAL & MEDICAL CENTERS, INC.

2. The name and address of the registered agent and office is:

Name: DR. STEPHEN T. HESS

Address: 566 BAY ESPLANADE

City: CLEARWATER STATE: FL ZIP-CODE: 33767

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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AND
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SIGNATURE: _____

Dr. Stephen T. Hess

TITLE: PRESIDENT

DATE: _____

12-16-99

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325 FLORIDA STATUTES.

SIGNATURE: _____

Dr. Stephen T. Hess

DATE: _____

12-16-99