P00000023515

TRANSMITTAL LETTER

Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314-6327

100003153771--4 -03/01/00--01117--001 *****78.75 *****78.75

SUBJECT:

THE CENTER FOR SPINE MEDICINE, P.A.

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

\$70.00

2\$78.75

\$122.50

\$131.25

Filing Fee

Filing Fee

Filing Fee &

Filing Fee &

Certified Copy Certified Copy

Additional Copy Required

NOTE: Please provide the original and one copy of the articles.

83/8

ARTICLES OF INCORPORATION OF THE CENTER FOR SPINE MEDICINE, P.A.

The undersigned incorporators, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt the following Articles of Incorporation.

ARTICLE I - NAME

The name of the corporation shall be The Center for Spine Medicine, P.A.

ARTICLE II - PRINCIPAL PLACE OF BUSINESS

The principal place of business and mailing address of this corporation shall be 2100 SE 17 Street, Suite #901, Ocala, FL 34471.

ARTICLE III - DURATION

This corporation shall have perpetual existence commencing on the date of this filing of these Articles with the Department of State. The fiscal year of the corporation will end each year on December 31st.

ARTICLE IV- PURPOSE

This corporation is organized for the purpose of medical practice under Florida Statutes, as now exist or may hereafter be amended. The business will conduct its operations in the geographical area of Ocala Florida and surrounding areas.

ARTICLE V - CAPITAL STOCK

This corporation is authorized to issue 10,000 shares of One dollar (\$1.00) par value common stock, which shall be designated as "Common Shares".

ARTICLE VI - PREEMPTIVE RIGHTS

Every shareholder, upon the sale for cash of any new stock of this corporation, shall have the right to purchase his pro rata share thereof (as nearly as may be done without issuance of fractional shares) at the price at which it is offered to others. The shareholders will be required to first offer their shares to the corporation before selling to other parties.

ARTICLE VII - INITIAL REGISTERED AGENT AND STREET ADDRESS

The name of the initial registered agent is Charles M. Grudem, M.D., and the address of the initial registered office of this corporation is 475 SW 48 Lane, Ocala, FL 34474.

ARTICLE VIII - INITIAL BOARD OF DIRECTORS

This corporation shall have two Directors constituting the initial Board of Directors. The number of directors may be either increased or decreased from time to time by the bylaws; however, there shall never be less than one Director.

The names and addresses of the initial Board of Directors of the corporation are:

NAME ADDRESS

Jon M. Carson, M.D. 2100 SE 17 Street, Suite #901, Ocala, FL 34471

Charles M. Grudem, M.D. 475 SW 48 Lane, Ocala, FL 34474

ARTICLE IX - INCORPORATORS

The names and street addresses of the incorporators who are the persons licensed in the State of Florida, who are to act as incorporators are as follows:

NAME ADDRESS

Jon M. Carson, M.D. 2100 SE 17 Street, Suite #901, Ocala, FL 34471

Charles M. Grudem, M.D. 475 SW 48 Lane, Ocala, FL 34474

ARTICLE X - INDEMNIFICATION

This corporation shall indemnify any officer or director or any former officer or director, to the full extent permitted by law. The corporation will defend the directors and officers against lawsuits.

ARTICLE XI - AMENDMENT

This corporation reserves the right to amend or repeal any provision contained in these Articles of Incorporation, or any amendment hereto, by a majority vote of the Board of Directors, and any right conferred upon the shareholders is subject to this reservation.

IN WITNESS WHEREOF, the undersigned incorporators have executed these Articles of Incorporation this 29% day of
February, 2000.
Jon M. Carson, M.D.
STATE OF FLORIDA, COUNTY OF MARION
BEFORE ME, a Notary Public authorized to take acknowledgments in the State and County set forth above, personally appeared Jon M. Carson, M.D., known to be and known by me to be the person who executed the foregoing Articles of Incorporation, or who producedFL Drivers Licenseas identification, and he acknowledged before me that he executed those Articles of Incorporation.
IN WITNESS WHEREOF, I have set my hand and seal in the State and County above, this <u>29</u> day of <u>February</u> , 2000.
Nancy A. Martino Commission # CC 794814 Expires MAR. 5, 2000 BONDED THRU ATLANTIC BONDING CO., INC.
Clarke m Howden was
Charles M. Grudem, M.D.
STATE OF FLORIDA, COUNTY OF MARION
BEFORE ME, a Notary Public authorized to take acknowledgments in the State and County set forth above, personally appeared Charles M. Grudem, M.D., known to be and known by me to be the person who executed the foregoing Articles of Incorporation or who producedFL Drivers Licenseas identification, and he acknowledged before me that he executed those Articles of Incorporation.
IN WITNESS WHEREOF, I have set my hand and seal in the State and County above, this $\frac{29\%}{2000}$ day of, 2000.
Nancy A. Martino Commission # CC 794814 Expires MAR. 5, 2000 BONDED THRU ATLANTIC BONDING CO., INC.

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICER/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1.	The name of the corporation is: <u>THE CENTER FOR SPINE MEDICINE, P.A.</u>			
2.	The name and address of the registered agent and office is:	SECRET TALLAHA	00 MAR -	
	Charles M. Grudem, M.D.	ARY D	-	
	475 SW 48 Lane	FLORI	7:2	
	Ocala, FL 34474	DA	6	

Having been named as registered agent and to accept service of process for the above stated corporation 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 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.

(SIGNATURE) 2/29/00 (DATE)

DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314