ţ CORPORATE ACCESS, 236 East 6th Avenue . Tallahassee, Florida 32305 P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666 INC.

# **WALK IN**

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SPECIAL INSTRUCTIONS	AM 9: 2
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### ARTICLES OF INCORPORATION

PRIMARY CARE PLUS OF FLORIDA, INC.

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida General Corporation Act, hereby adopt(s) the following Articles of incorporation.

#### ARTICLE I NAME

The name of the corporation shall be: PRIMARY CARE PLUS OF FLORIDA, INC.

The principal place of business of this corporation shall be: 3107 W. Hallandale Beach Blvd., Suite 103, Hallandale, FL 330, 19

#### ARTICLE II NATURE OF BUSINESS

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

### ARTICLE III CAPITAL STOCK

The aggregate number of shares of stock and its value that this corporation is authorized to have outstanding at any one time is:

100 Shares, \$1.00 par value

## ARTICLE IV TERM OF EXISTENCE

This corporation is to exist perpetually.

### ARTICLE V OFFICERS DIRECTORS

The name(s) and street address(es) of the initial officer(s) and director(s), if any, who shall hold office the first year of the corporation's existence or until their successor(s) is(are) elected, is(are):

Joseph Di Capua 3±07 W. Hallandale Beach Blvd., Suite 103, Hallandale, FL 33009
President/Director

Scott R. English, MD 3107 W. Hallandale Beach Blvd., Suite 103, Hallandale, FL 33009 Vice-president/Director

## ARTICLE VI INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to this articles of incorporation is(are):

EARL S. BAGAN 3107 W. Hallandale Beach Blvd., Suite 103, Hallandale, FL 33009

IN WITNESS WHEREOF, the undersigned incorporator(s) has (have) executed these Articles of Incorporation this, 6th day of March 12000

Signature(s) of Incorporator(s)

EARL S. BAGAN

# CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions 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	cor	poration:
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PRIMARY CARE PLUS OF FLORIDA,	RLMAKI	CLDA, INC.
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2. The name and address of the registered agent and office is:

EARL S. BAGAN	3107 W. Hallandale Beach Blvd., Suite 103 _ o
	(P.O. BOX NOT ACCEPTABLE) 도움
	Hallandale, FL 33009
	(CITY/STATE/ZIP)
	SIGNATURE Earl S. Bagan
	TITLE Registered Agent .
	DATE

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

Earl S. Bagan

DATE March 6, 2000