

PERCH AND HILL, P.A.
ATTORNEYS & COUNSELORS AT LAW
222 PLAZA DRIVE
LEHIGH ACRES, FLORIDA
33936-6108

DARRELL R. HILL

OF COUNSEL
BARRY J. PERCH

TELEPHONE
(941) 369-6106
FAX
(941) 369-0124

March 14, 2000

100003173871--8
-03/17/00--01040--016
*****78.75 *****78.75

RE: LIGHTHOUSE FAMILY CARE, P.A.

Dear Sir/Madam:

Enclosed herewith please find the original and one copy of the Articles of Incorporation for the above named proposed Florida Corporation.

In addition, enclosed herewith is a check in the amount of \$78.75 representing payment as follows:

Filing Fee
Certified Copy Fee
Registered Agent Fee

Kindly file the enclosed Articles of Incorporation and thereafter return a certified copy of same to the office of the undersigned.

Your anticipated cooperation in this matter is greatly appreciated.

Very truly yours,

PERCH AND HILL, P.A.

Lori A. German
Lori A. German
Legal Assistant to Darrell R. Hill, Esquire

Enclosures

FILED
00 MAR 17 PM 4: 07
SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLES OF INCORPORATION
OF
LIGHTHOUSE FAMILY CARE, P.A.

FILED
00 MAR 17 PM 4:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I. NAME

The name of this Corporation is: LIGHTHOUSE FAMILY CARE, P.A.

II. DURATION

This Corporation shall have perpetual existence commencing on the filing of these Articles with the Secretary of State, State of Florida.

III. PURPOSE

This Corporation is organized for the purpose of transacting any or all lawful business permitted in the general practice of administering aid and medicine to the general public pursuant to Chapter 621 of the Florida Statutes, and the Professional Service Corporation Act.

IV. CAPITAL STOCK

This Corporation is authorized to issue ONE HUNDRED (100) shares of ONE (\$1.00) DOLLAR par value common stock.

V. INITIAL PRINCIPAL AND REGISTERED OFFICE AND AGENT

The street address of the initial principal and registered office of this Corporation is 9400 Gladiolus Drive, Suite 404, Fort Myers, Florida 33908 and the name of the initial registered agent of this Corporation at the address is: JAVIER E. SOSA, M.D.

VI. INITIAL BOARD OF DIRECTORS

This Corporation shall have one director initially. The number of directors may be either increased or diminished from time to time by the bylaws but shall never be less than one. The name and address of the initial director of this Corporation is: JAVIER E. SOSA, M.D., 9400 Gladiolus Drive, Suite 404, Fort Myers, Florida 33908.

VII. INCORPORATOR

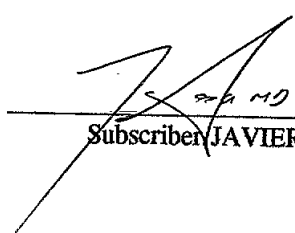
The name and address of the person signing these articles are:

JAVIER E. SOSA, M.D., 9400 Gladiolus Drive, Suite 404, Fort Myers, Florida 33908.

VIII. AMENDMENT

This Corporation reserves the right to amend or repeal any provisions contained in these Articles of Incorporation, or any amendment to them, and any right conferred upon the shareholders is subject to this reservation.

IN WITNESS WHEREOF, the undersigned subscriber executed these Articles of Incorporation on the 14 day of MARCH, 2000.


Subscriber JAVIER E. SOSA, M.D.

STATE OF FLORIDA
COUNTY OF LEE

On this day personally appeared before me, an officer duly authorized to administer oaths and take acknowledgments, known to me to be the subscriber in the above Articles of Incorporation, and acknowledged before me that they have read the foregoing and that the same is true, and that he has executed same for the purposes therein mentioned.


Subscriber/JAVIER E. SOSA, M.D.

SWORN TO AND SUBSCRIBED before me this 14 day of MARCH, 2000,
by JAVIER E. SOSA, M.D., who is personally known to me.


Notary Public

DARRELL R. HILL

Commission Number

(Name of Notary)

(SEAL)

CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE
SERVICE OF PROCESS WITHIN THIS STATE, NAMING AGENT UPON WHOM
PROCESS MAY BE SERVED.

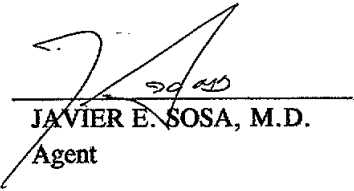
In pursuance of Chapter 607.0501, Florida Statutes, the following is submitted,
in compliance with said Act:

That **LIGHTHOUSE FAMILY CARE, P.A.**, a Florida Corporation, desiring to
organize under the laws of the state of Florida, with its principal office, as indicated in
the Articles of Incorporation at 4900 Gladiolus Drive, Suite 404, Fort Myers, Florida
33908, has named **JAVIER E. SOSA, M.D.**, located at 9400 Gladiolus Drive, Suite
404, Fort Myers, Florida 33908, as its agent to accept service of process within this
State.

ACKNOWLEDGMENT

Having been named to accept service of process for the above stated
Corporation, at the place designated in this Certificate, I hereby accept to act in this
capacity, and agree to comply with the provisions of said Act relative to keeping open
said office.

BY:


JAVIER E. SOSA, M.D.
Agent

FILED
00 MAR 17 PM 4:07
SECRETARY OF STATE
TALLAHASSEE FLORIDA