	questor's Name Paul Caron 3 Brierwood Rd. csonville, FL 32217		4155		
City/State/	Zip Phone #		Office Use Onl	-	
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CORPORATION	NAME(S) & DOCUM	ENT NUMBER	u(S), (II known):		
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•	poration Name)	(Documen	n #)		
4. <u>(Cor</u>	poration Name)	(Document	at #)		
	Pick up time Will wait	Photocopy	Certified Copy Certificate of Status	· · · · · · · · · · · · · · · · · · ·	
NEW FILINGS	AMENDMEN	S	AL	SEC	
Profit	Amendment	Amendment		APR 25 PM 3: 21 CRETARY OF STATE	
NonProfit	Resignation of R.A.	Resignation of R.A., Officer/ Director		ARY 25	
Limited Liability	Change of Registere	Change of Registered Agent			
Domestication	Dissolution/Withdr	Dissolution/Withdrawal		SIA REI	
Other	Merger		<u>.</u> .		
OTHER FILINGS Annual Report	REGISTRA QUALIFICA	INCOLUDINATE SERVICES SERVICES	00000000004884		
Fictitious Name	Foreign	Foreign Limited Partnership		8000032234884 -04/25/0001064021 *****87.50 *****87.50	
Name Reservation					
	Reinstatement			-	
	Trademark			-	
N-9854	Other				
CR2E031(1/95)	Paul Caron gave permission to fix out the		Examiner's Initials		
((((((((((((((((((((out to Ke		L	<u> </u>	



FLORIDA DEPARTMENT OF STATE

Katherine Harris Secretary of State

April 13, 2000

PAUL CARON 8483 BRIERWOOD RD JACKSONVILLE, FL 32217

SUBJECT: P.C. SURGICAL, INC. Ref. Number: W00000009854

We have received your document for P.C. SURGICAL, INC., however, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State.

The fees for profit and nonprofit, domestic or foreign are as follows:

Filings Fees:	\$35.00
Registered Agent	\$35.00
Designation Certified Copy	\$8.75
Certificate of Status	\$8.75

The effective date is not acceptable since it is not within five working days of the date of receipt.

Please return the original and one copy of 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) 487-6924.

Kimberly Rolfe Corporate Specialist Supervisor

Letter Number: 600A00020434

ARTICLES OF INCORPORATION OF

FIRST:

The name of this corporation is:

"P.C. SURGICAL, INC."

SECOND:

The general nature of the business or businesses to be transacted is as follows:

To transact any lawful business and to exercise all powers granted to corporations by the

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ALLANASSEE E, STATE,

laws of the State of Florida.

THIRD:

The maximum number of shares with par value that this corporation is authorized to have

outstanding at any one time is one thousand (1000) shares of the par value of zero and

no/100 dollars (\$0.00) each.

FOURTH:

This corporation is to have perpetual existence.

FIFTH:

The principal office and mailing address of the corporation will be at 8483 Brierwood

Road, Jacksonville, Florida, 32217.

SIXTH:

The number of its directors shall be one (1) or such other number as the shareholders may

from time to time designate but never less than one (1).

SEVENTH:

The name and address of the member of the first board of directors, who shall hold office

for the first year of the existence of the corporation or until his/her successors or successors

are elected or appointed and have qualified is:

<u>NAME</u>

ADDRESS

Paul Caron

8483 Brierwood Road

Jacksonville, Florida 32217

EIGHTH:

The name and address of the sole subscriber of the Articles of Incorporation is as follows:

NAME

ADDRESS

Paul Caron

8483 Brierwood Road

Jacksonville, Florida 32217

NINTH:

The street address of the initial registered office of this corporation is 8483 Brierwood

Road, Jacksonville, Florida, 32217 and the name of the initial registered agent of this

corporation at that address is Paul Caron.

TENTH:

This corporation reserves the right to amend, alter, change or repeal any provision contained in its articles of incorporation, in the manner now or hereafter prescribed by statute, and all rights conferred upon stockholders herein are granted subject to this reservation.

I, THE UNDERSIGNED, being the sole original subscriber herein-before named for the purpose of forming a corporation to do business both within and without the State of Florida, do make, subscribe, acknowledge, and file these articles, hereby declaring and certifying that the facts herein stated are true, and accordingly have hereunto set my hand and seal this ______ day of April 2000.

Paul Caron PDL C 650-685-68-097-0

STATE OF FLORIDA)

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COUNTY OF DUVAL)

BE IT REMEMBERED, that on this ______ day of April 2000, personally came before me, a Notary Public for the State of Florida, PAUL CARON party to the foregoing Articles of Incorporation, known to me personally to be such and who did not take an oath, and who acknowledged the said Articles to be the act and deed of the signers and that the facts therein stated are truly set forth.

GIVEN under my hand and seal of office the day and year aforesaid.

Name:

WILLEANER BONNE!
MY COMMISSION # CC 6:9342
EXPIRES: March 2: 2003
Bonded Thru Notary Public Underwriters

My Commission Expires: My Commission Number is:

CERTIFICATE NAMING AGENT UPON WHOM PROCESS MAY BE SERVED

In compliance with Chapter 48.091, Florida Statutes, the following is submitted.

That P.C. SURGICAL, INC., a corporation duly organized and existing under the laws of the State of Florida, has named PAUL CARON as its Registered Agent, located at 8483 Brierwood Road, Jacksonville, Florida, 32217, as its agent to accept service of process within Florida.

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 agreed 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 607.0505, Florida Statutes.

Paul Caron

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