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ACCOUNT NO. : 072100000032

REFERENCE : 691096 81555A

AUTHORIZATION : _____

COST LIMIT : \$ PPD _____

ORDER DATE : May 9, 2000

ORDER TIME : 1:49 PM

ORDER NO. : 691096-005

CUSTOMER NO: 81555A

CUSTOMER: Robert E. Boutwell, Esq
BOUTWELL & CONNICK
BOUTWELL & CONNICK
411 East Hillsboro Boulevard

Deerfield Beach, FL 33441

DOMESTIC FILING

NAME: SYNERGY MEDICAL CENTER, INC.

EFFECTIVE DATE: PPD

XX ARTICLES OF INCORPORATION
____ CERTIFICATE OF LIMITED PARTNERSHIP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY
____ PLAIN STAMPED COPY
____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Janine Lazzarini

EXAMINER'S INITIALS:

400003245664--8
-05/10/00--01005--005
*****78.75 *****78.75

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
00 MAY -9 PM 4:12

RECEIVED
00 MAY -9 PM 3:22
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FL 32310

EFFECTIVE DATE

5/4/00

ARTICLES OF INCORPORATION

OF

SYNERGY MEDICAL CENTER, INC.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 MAY -9 PM 4:12

The undersigned hereby enters into these Articles of Incorporation for the purpose of establishing a corporation in accordance with the laws of the State of Florida.

ARTICLE I

The name of the corporation shall be SYNERGY MEDICAL CENTER, INC.

ARTICLE II

This corporation shall have perpetual existence.

ARTICLE III

This corporation may engage in any activity or business permitted under the laws of the United States and of this State.

ARTICLE IV

The total authorized capital stock of this corporation shall be one thousand (1,000) shares of common stock at a par value of one (\$1.00) dollar per share, fully paid and non-assessable.

ARTICLE V

The street address of this corporation's initial principal office is as follows:

2641 NE 48th St.
Lighthouse Point, FL 33064

ARTICLE VI

The business of the corporation shall be conducted by a Board of Directors, the number of members of which shall, except for the initial Board, be determined by the Bylaws, but shall never be fewer than one (1).

ARTICLE VII

The initial Board of Directors shall consist of one (1) member. The name and address of the initial Board of Directors, who shall hold office for the first year of the corporation's existence or until his or her successor is elected and has qualified is as follows:

<u>NAME</u>	<u>ADDRESS</u>
CINDY B. TAFFEL	2641 NE 48th St. Lighthouse Point, FL 33064

ARTICLE VIII

The name and street address of the Incorporators of this corporation is as follows:

<u>NAME</u>	<u>ADDRESS</u>
CINDY B. TAFFEL	2641 NE 48th St. Lighthouse Point, FL 33064

ARTICLE IX

The initial Bylaws of this corporation shall be adopted by the Directors. The Bylaws may be amended from time to time by either the stockholders or the Directors, but the Directors may not alter or amend any Bylaw adopted by the stockholders.

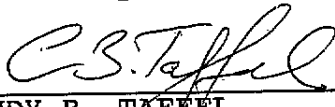
ARTICLE X

This corporation reserves the right to amend or repeal any provisions contained in these Articles of Incorporation and any right of the stockholders of this corporation is subject to this reservation.

ARTICLE XI

In accordance with Florida Statutes 607.167, the effective date for commencement of corporate existence shall be immediately upon the signing of these Articles of Incorporation.

IN WITNESS WHEREOF, the Incorporator hereto has hereunto affixed her hand and seal this 4th day of May, 2000.

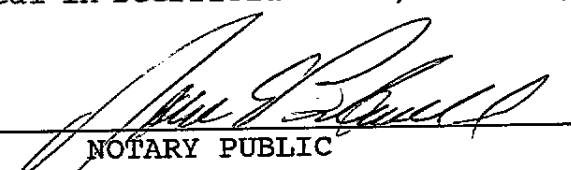

CINDY B. TAFFEL

STATE OF FLORIDA)

COUNTY OF BROWARD)

BEFORE ME, the undersigned authority, personally appeared CINDY B. TAFFEL, to me well known to be the person described in and who executed the foregoing Articles of Incorporation, and she produced a Florida Drivers License and acknowledged before me that she signed the same for the uses and purposes therein expressed.

WITNESS my hand and official seal in Deerfield Beach, Florida, this 4th day of May, 2000.


NOTARY PUBLIC



Robert E. Boutwell
MY COMMISSION # CC701691 EXPIRES
March 6, 2002
BONDED THRU TROY FAIR INSURANCE, INC.

STATE OF FLORIDA

DEPARTMENT OF STATE

Certificate Designating Place of Business or Domicile for the Service of Process Within This State, Naming Agent Upon Whom Process May Be Served and Names and Addresses of the Officers and Directors.

The following is submitted, in compliance with Chapter 48.091, Florida Statutes:

SYNERGY MEDICAL CENTER, INC.

a corporation organized (or organizing) under the laws of the State of Florida with it's principal office at 2641 NE 48th St. in the City of Lighthouse Point, County of Broward State of Florida, has named CINDY B. TAFFEL, located at: 2641 NE 48th St.

(Street Address & Number of Bldg., P.O.Box address not acceptable)
City of Lighthouse Point, County of Broward
State of Florida, as its agent to accept service of process within this state.

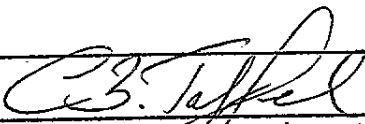
OFFICERS:

NAME	TITLE	SPECIFIC ADDRESS
<u>Cindy B. Taffel</u>	<u>(P)</u>	<u>2641 NE 48th St.</u> <u>Lighthouse Point, FL 33064</u>
<u>" "</u>	<u>(S)</u>	<u>" "</u>
<u>" "</u>	<u>(T)</u>	<u>" "</u>
<u>" "</u>	<u>(V)</u>	<u>" "</u>

DIRECTORS:

	SPECIFIC ADDRESS
<u>Cindy B. Taffel</u>	<u>2641 NE 48th St.</u> <u>Lighthouse Point, FL 33064</u>
<u> </u>	<u> </u>
<u> </u>	<u> </u>
<u> </u>	<u> </u>

By


(corporate officer)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 MAY -9 PM 4: 12

ACCEPTANCE:

I agree as Resident Agent to accept Service of Process: to keep office open during prescribed hours; to post my name (and any other officers of said corporation authorized to accept service of process at the above Florida designated address) in some conspicuous place in office as required by Law.

Filing fee: \$3.00



(Resident Agent)