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Florida Department of State
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To:

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Fax Number : (850) 922-4001

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Account Name : EMPIRE CORPORATE KIT COMPANY
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00 MAY 25 AM 7:37
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FLORIDA PROFIT CORPORATION OR P.A.

PATIENT MANAGEMENT SOLUTIONS, INC.

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$78.75

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ARTICLES OF INCORPORATION

OF

Patient Management Solutions, Inc.

A FLORIDA CORPORATION

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 Patient Management Solutions, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

9200 SW 212 Terr.
Miami, FL 33189

ARTICLE III CAPITAL STOCK

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

1000 Shares, No Par Value

ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:

Richard B. Pyles
20343 Old Cutler Rd.
Miami, FL 33189

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ARTICLE V INCORPORATORS

The names and street addresses of the incorporator to these Articles of Incorporation is:

Nancy Bongiovanni
9200 SW 212 Terr.
Miami, FL 33189

The undersigned has executed these Articles of Incorporation this the 8th day of March, 2000.


Nancy Bongiovanni

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**CERTIFICATION OF DESIGNATION
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 office/registered agent, in the State of Florida.

1. The name of the corporation is Patient Management Solutions, Inc.
2. The name and address of the registered agent and office is:

Richard B. Pyles
20343 Old Cutler Rd.
Miami, FL 33189

Signature *Ray P. Pyles*
President

Date: March 8, 2000

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 *Richard B. Pyles*
Richard B. Pyles

Date: March 8, 2000

Registered Agent Filing Fee: \$35.00

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TALLAHASSEE, FLORIDA

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