Requester's Name Total Med Network Inc. 421 W. Church St. Ste 702 Jacksonville, FL 32202

Office Use Only

Examiner's Initials

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

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1. (Corporation Name)	
(Corporation Name)	(Document #)
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NEW FILINGS	AMENDMENTS
Profit Profit	☐ Amendment
Not for Profit	
	Resignation of R.A., Officer/Director
Limited Liability	☐ Change of Registered Agent
Domestication	☐ Dissolution/Withdrawal
Other	<u> </u>
— Other	☐ Merger
OTHER FILINGS	REGISTRATION/QUALIFICATION
Annual Report	Foreign
☐ Fictitious Name	
- Fichious Name	Limited Partnership
	Reinstatement
	Trademark
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ARTICLES OF INCORPORATION OF TOTAL MED NETWORK INC.

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ARTICLE I - NAME

The name of this corporation is Total Med Network Inc.

ARTICLE II - ADDRESS

The mailing address of the corporation will be:

Total Med Network Inc. 421 W. Church Street, Suite 702 Jacksonville, FL 32202

ARTICLE III – PURPOSE

This corporation is organized for the following purposes:

- (a) To operate and provide Online Services
- (b) The ownership, purchase, sale, mortgage or pledge, and the dealing in and with all kinds and manner of property, wether, real, personal, tangible or intangible
- (c) The transaction of any and all other lawful business for which corporations may be incorporated and the doing of all lawful things related thereto.

ARTICLE IV – CAPITAL STOCK

This corporation is authorized to issue 4,000,000 shares of \$.01 par value common stock. Each outstanding share, regardless of class shall be entitled to one (1) vote on each matter submitted to a vote at a meeting of the shareholders. The shares of stock may be issued for such consideration, having a value not less than the par value of the shares issued therefore, as is determined from time to time by the board of directors, to be paid, in whole or in part, in cash or other property, tangible or intangible, or in labor or services actually performed for the corporation.

ARTICLE V – INITIAL REGISTERED AGENT AND OFFICE

The name of the initial registered agent and street address of the initial registered office of this corporation is:

William E. Shields 421 W. Church Street, Suite 702 Jacksonville, FL 32202

ARTICLE VI - INITIAL BOARD OF DIRECTORS

This corporation shall have six (6) directors initially. The number of directors may either be increased or diminished from time to time by-law but shall never be less than one (1). All corporate powers shall be exercised by and under the authority of, and the business and affairs of the corporation shall be managed under the direction of, the board of directors. Any and all of the powers and duties conferred to or imposed upon the board of directors, by resolution of the shareholders adopted at a special meeting called for that purpose, may be exercised or performed to such extent and by such person or persons as shall be provided by the shareholders.

The names and addresses of the initial directors are:

William E. Shields 11684 Olde Mandarin Rd. Jacksonville, FL 32223

David Shields 11684 Olde Mandarin Rd. Jacksonville, FL 32223

Wayne Stephens 141 Roscoe Blvd. North Ponte Vedra Beach, FL 32082

Paul Courtney 137 Roscoe Blvd. North Ponte Vedra Beach, FL 32082

William Pezzutti 12966 Silver Oak Drive Jacksonville, FL 32223

Alexandra R. Seay 5 Sea Lane South St. Petersburg, Fl 33705

ARTICLE VII - INCORPORATOR

The names and addresses of the incorporation signing these articles are

William E. Shields 11684 Olde Mandarin Rd. Jacksonville, FL 32223

David Shields 11684 Olde Mandarin Rd. Jacksonville, FL 32223

The undersigned have executed these Articles of Incorporation this 17th day of May, 2000.

William E. Shields President

David Shields, Secretary

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 FLORIDA STATUTES, THE UNDERSIGNED CORPORATION ORGANIZED UNDER THE LAW 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: Total Med Network Inc.
- 2. The name and address of the registered agent and office is:

William E. Shields 421 W. Church Street, Suite 702 Jacksonville, FL 32202

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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 at this capacity. I further agree to comply with the provisions of all statues relating to the proper and complete performance of my duties and I am familiar with and accept the obligation of my position as registered agent.

(Signatura)

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