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Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

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FROM:	ROGER Name (Pr	A. BROWN E	<u>i, MD</u>	00 JUN F
	4359 N.W. 815	TERRACE_		FIED FIED
	CORAL SPRING	33 0 GS FL 300 State & Zip	65 R	1:08
		344 - 3130 elephone number	·	
			and the second s	

ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)			
ARTICLE I NAME The name of the corporation shall be: ROGER A. BROWNE, M.D., P.A.	÷ :		
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: #359 NW 81 ^{SE} TERRACE CORAL SPRINGS, FL. 33065 ARTICLE III PURPOSE		TALLAHASSEE,	OD JUN -6 P.
The purpose for which the corporation is organized is:		OTE S	
PHYSICIAN'S DFFICE		RD N	8
ARTICLE IV SHARES The number of shares of stock is:	-		च्यार काल्यीस्त १००० काल्यो से रेस्ट
50			
The name(s) and address(es): ROGER. A. BROWNE, MD / OFFICER DIRE SANDRA A. CHUNG / SECRETARY H359 NW 81St TERRACE CORAL SPRINGS, FL. 33065	CTO	R	
ARTICLE VI REGISTERED AGENT The name and Florida street address registered agent is: SANDRA. 4359 NW 81 TERRACE CORAL SPRINGS, FL. 33065	A·C	Huwc	
ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Roger A. Browne, MD. H359 NW 818 TERRACE CORAL SPRINGS, FL. 33065			
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Signature/Registered Agent	5 3 Date	100	
Signature/Incorporator 209EL A. BROWNE, M.D.	5 3 Date	סס	