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TRANSMITTAL LETTER

FILED

00 JUN -8 AM 9:40

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

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-06/08/00--01070--008
*****78.75 *****78.75

SUBJECT: GERIATRIC SPECIALISTS, P.A.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

☐ \$70.00
Filing Fee

☒ \$78.75
Filing Fee
& Certificate of Status

☐ \$78.75
Filing Fee
& Certified Copy

☐ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: CARLOS E. MERCADO, M.D.
Name (Printed or typed)

9060 SUMMIT CENTRE WAY, AP 308
Address

ORLANDO, FL 32810
City, State & Zip

407-475-1593 FAX 407-786-0370
Daytime Telephone number

E-MAIL = CARLOS.MERCADO@MCIWORLD.COM

NOTE: Please provide the original and one copy of the articles.

R 6/15/00

DISSOLUTION OF GERIATRIC SPECIALISTS, INC

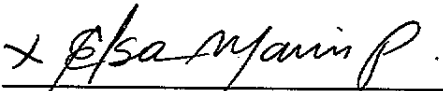
6-5-00

**DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
P.O. BOX 6327
TALLAHASSEE, FL 32314**

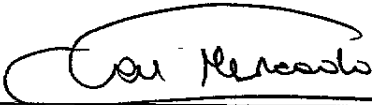
**GERIATRIC SPECIALISTS, INC
FEDERAL TAX ID NUMBER: 59-3635107**

REF: VOLUNTARY DISSOLUTION / WITHOUT REVOKING IT

**THIS IS TO INFORM YOU THAT GERIATRIC SPECIALISTS, INC HAS
DECLARED A VOLUNTARY DISSOLUTION. ALSO TO INFORM THAT THIS
DECISION IS DEFINITIVE AND WILL NOT REVOKE ITS DISSOLUTION.**



**Elsa Marin Poveda
President**



**Carlos Eduardo Mercado
Vice President**

**ARTICLES OF ASSOCIATION
OF
GERIATRIC SPECIALISTS, P.A.**

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**ARTICLE I
Name**

The name of the association is:
GERIATRIC SPECIALISTS, P. A.

**ARTICLE II
Address**

The Corporation's Mailing address is:

Geriatric Specialists, P.A.
9060 Summit Centre Way,
Ap 308
Orlando, FL 32810

Or

PO Box 941157
Maitland, FL 32794-1157

**ARTICLE III
Purpose**

The Professional Association is organized for the purpose of engaging in the practice of medicine.

**ARTICLE IV
Office and Agent**

The address of the initial registered office is:

**9060 Summit Centre Way, Ap 308
Orlando FL 32810.**

The initial registered agent, whose address is the same as the registered office, is **CARLOS E MERCADO MD.**

ARTICLE V

Original Member

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**ARTICLE IX
Incorporator**SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The name and address of the Association is:

CARLOS MERCADO, MD**9060 Summit Centre Way
Ap 308
Orlando FL 32810****ARTICLE X
Power to Dissolve**

No member of the Professional Association shall have the power to dissolve the association by the member's independent act of any kind.

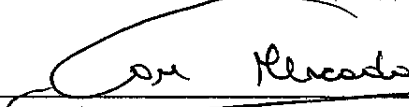
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent **CARLOS E. MERCADO**

6-3-00

Date



Signature/Incorporator **CARLOS E. MERCADO**

6-3-00

Date