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FILED  
00 JUN 19 AM 11:35  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

June 1, 2000

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

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-06/19/00--01111--004  
\*\*\*\*\*70.00 \*\*\*\*\*70.00

Re: MICHAEL FLETCHER, M.D., P.A.

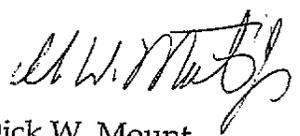
Dear Sir/Madam:

Enclosed for filing please find an original and one (1) copy of the articles of incorporation, an original and one (1) copy of the certificate naming the registered agent and my check in the amount of \$70.00 to cover the filing fees.

Please return conformed copies of the articles and certificate to my office in the enclosed postage paid envelope.

Thank you for your assistance.

Sincerely,



Dick W. Mount

DWM/tk  
enc.

Put 6/24/00

ARTICLES OF INCORPORATION OF  
MICHAEL FLETCHER, M.D., P.A.

FILED  
00 JUN 19 AM 11:35

The undersigned, for the purpose of forming a corporation under the Florida Business Corporations Act, does hereby adopt the following articles of incorporation:

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ARTICLE ONE  
NAME

The name of the corporation is MICHAEL FLETCHER, M.D., P.A.

ARTICLE TWO  
CORPORATE DURATION

The duration of the corporation is perpetual.

Corporate existence shall commence upon the filing of these Articles of Incorporation.

ARTICLE THREE  
PURPOSE OR PURPOSES

The general purposes for which the corporation is organized are:

1. To engage in the practice of medicine specializing in delivery of pain management and anesthesiology physician services to patients. .
2. To transact any other lawful business for which corporations may be incorporated under the Florida Business Corporations Act or engage in any other trade or business which can, in the opinion of the board of directors of the corporation, be advantageously carried on in connection with or auxiliary to the foregoing business.
3. To do such other things as are incidental to the foregoing or necessary or desirable in order to accomplish the foregoing.

ARTICLE FOUR  
CAPITALIZATION

The aggregate number of shares which the corporation is authorized to issue is one hundred (100). Such shares shall be of a single class, and shall have a par value of one penny (\$.01) per share.

ARTICLE FIVE  
REGISTERED OFFICE AND AGENT

The street address of the initial registered office of the corporation is 26800 South Tamiami Trail, Suite 220, Bonita Springs, Florida 34134, and the name of its initial registered agent at such address is Michael Fletcher, M.D..

ARTICLE SIX  
DIRECTORS

The number of directors constituting the initial board of directors of the corporation is one (1). The name and address of each person who is to serve as a member of the initial board of directors is:

NAME	ADDRESS
Michael Fletcher, M.D.	26800 South Tamiami Trail Suite 220 Bonita Springs, Florida 34134

ARTICLE SEVEN  
INCORPORATORS

The name and address of each incorporator is:

NAME	ADDRESS
Michael Fletcher, M.D.	26800 South Tamiami Trail Suite 220 Bonita Springs, Florida 34134

ARTICLE EIGHT  
PRINCIPAL OFFICE

The address of the principal office of the corporation is:

26800 South Tamiami Trail  
Suite 220  
Bonita Springs, Florida 34134

and the mailing address of the corporation is:

26800 South Tamiami Trail  
Suite 220  
Bonita Springs, Florida 34134

Executed by the undersigned at Naples, Florida on <sup>May</sup> ~~April~~ 9, 2000. *(initials)*

Michael Fletcher MD  
Michael Fletcher, M.D.

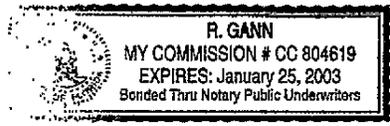
STATE OF FLORIDA  
COUNTY OF COLLIER

*(initials)* The foregoing instrument was acknowledged before me this <sup>9<sup>th</sup></sup> day of <sup>May</sup> ~~April~~, 2000, by Michael Fletcher, M.D., incorporator of Michael Fletcher, M.D., P.A., on behalf of the corporation. He is personally known to me or has produced known to me as identification and did (did not) take an oath.

R. Gann  
Notary Public-State of Florida

Rosemarie Gann  
Print Name of Notary Public

My commission expires:



FILED

00 JUN 19 AM 11:35

To: The Department of State  
Tallahassee, Florida 32304

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

CERTIFICATE DESIGNATING PLACE OF BUSINESS  
OR DOMICILE FOR THE SERVICE OF PROCESS  
WITHIN FLORIDA, NAMING AGENT UPON WHOM  
PROCESS MAY BE SERVED

In compliance with Section 607.0501 of the Florida Business Corporations Act, the following is submitted:

Michael Fletcher, M.D., P.A., with its place of business at 26800 South Tamiami Trail, Suite 220, Bonita Springs, Florida 34134 has named Michael Fletcher, M.D., located at 26800 South Tamiami Trail, Suite 220, Bonita Springs, Florida 34134, as its agent to accept service of process within Florida.

Dated: ~~April~~ <sup>May</sup> 9, 2000.

Michael Fletcher, M.D.  
Michael Fletcher, M.D.

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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Dated: ~~April~~ <sup>May</sup> 9, 2000.

Michael Fletcher, M.D.  
Michael Fletcher, M.D.