

Division of Corporations

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Florida Department of State
Division of Corporations
Public Access System
Katherine Harris, Secretary of State

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To:

Division of Corporations
Fax Number : (850) 922-4001

From:

Account Name : FLORIDA INCORPORATORS, INC.
Account Number : 075350000473
Phone : (305) 661-8503
Fax Number : (603) 761-7427

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOMESTICATION

Provider Technologies, Inc.

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$128.75

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Florida Department of State, Katherine Harris, Secretary of State

CERTIFICATE OF DOMESTICATION

The undersigned, Robert G. Little, Vice Chairman and Treasurer,
(Name) (Title)

of Provider Technologies, Inc. a foreign Corporation,
(Corporation Name)

in accordance with Florida Statutes, section 607.1801 does hereby certify:

1. The date on which corporation was first formed was December 8, 19 99
2. The jurisdiction where the above named corporations was first formed, incorporated, or otherwise came into being was Delaware
3. The name of the corporation immediately prior to the filing of this Certificate of Domestication was Provider Technologies, Inc.
4. The name of the corporation, as set forth in its articles of incorporation, to be filed pursuant to ss. 607.0202 and 607.0401 with this certificate is Provider Technologies, Inc.
5. The jurisdiction that constituted the seat, siege, social principal place of business or central administration of the corporation, or any other equivalent thereto under applicable law immediately prior to the filing of the Certificate of Domestication was

Delaware

I am Robert G. Little, of Provider Technologies, Inc.

and am authorized to sign this certificate of Domestication on behalf of the corporation and have done

so this the 8th day of August

2000



(Authorized Signature)
Robert G. Little

Filing Fee:

Certificate of Domestication	\$50.00
Articles of Incorporation and Certified Copy	\$78.75
Total to domesticate and file	\$128.75

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Articles Of Incorporation
Of

Provider Technologies, Inc.

THE UNDERSIGNED, ACTING AS INCORPORATOR OF A CORPORATION UNDER THE FLORIDA BUSINESS CORPORATION ACT, ADOPTS THE FOLLOWING ARTICLES OF INCORPORATION:

FIRST: The name of the corporation is Provider Technologies, Inc.

SECOND: The period of its duration is perpetual.

THIRD: The date and time of the commencement of the corporate existence shall be the date of the filing of these Articles by the Department of State.

FOURTH: The purpose or purposes for which the corporation is organized is to engage in the transaction of any or all lawful business for which the corporation may be incorporated under the provisions of the Florida Business Corporation Act.

FLORIDA INCORPORATORS, INC.
1221 BRICKELL AVE, STE. 900
MIAMI, FL 33131
(305) 661-8503

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FIFTH: The aggregate number of shares which the corporation shall have authority to issue is FIFTEEN THOUSAND (15,000) SHARES of capital stock, \$5.00 par value each.

SIXTH: The number of directors constituting the initial Board of Directors of the corporation is FOUR (4) and the names and addresses of the persons who are to serve as directors until the first annual meeting of shareholders or until their successors are elected and qualified are:

DARRYL MADISON
6912 SHADY PLACE
TAMPA FL 33634

Chairman

ROBERT G. LITTLE
6914 WILLIAMS DRIVE
TAMPA FL 33634

Vice Chairman

CURT LONG
20 108TH AVE. SOUTH
TREASURE ISLAND FL 33706

Director

YVONNE MADISON
6912 SHADY PLACE
TAMPA FL 33634

Director

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SEVENTH: The names and addresses of the persons who are to serve as officers until the first annual meeting of shareholders or until their successors are elected and qualified are:

DARRYL MADISON
6912 SHADY PLACE
TAMPA FL 33634

President

CURT LONG
20 108TH AVE. SOUTH
TREASURE ISLAND FL 33706

Vice President

YVONNE MADISON
6912 SHADY PLACE
TAMPA FL 33634

Secretary

ROBERT G. LITTLE
6914 WILLIAMS DRIVE
TAMPA FL 33634

Treasurer

EIGHTH: The name and address of the incorporator is:

Mark Hankins
1221 Brickell Avenue, Suite 900
Miami, FL 33131

NINTH: The name and address of the initial registered agent and the initial registered office is:

Florida Incorporators, Inc.

H00000041680
1221 Brickell Avenue, Suite 900
Miami, FL 33131

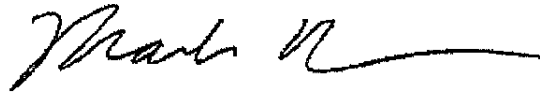
TENTH: The principal office of the corporation is:

Provider Technologies, Inc.
6912 Shady Place
Tampa, FL 33634

ELEVENTH: The mailing address of the corporation
is:

Provider Technologies, Inc.
PO BOX 260727
TAMPA FL 33685-0727

DATED: August 8, 2000

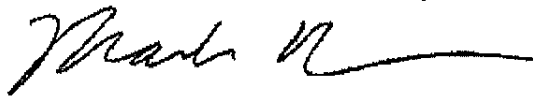


MARK HANKINS
Incorporator

ACCEPTANCE OF REGISTERED AGENT

I hereby am familiar with and accept the duties and
responsibilities as registered agent of the corporation.

FLORIDA INCORPORATORS, INC.

By: 
MARK HANKINS, President

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