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LAW OFFICES OF L. BYRON REID, CHARTERED

109 Harrison Avenue  
P. O. Box 607 (32402)  
Panama City, Florida 32401

FILED

00 SEP 21 AM 9:13

Telephone: (850) 913-8800

September 20, 2000

Facsimile: (850) 784-0012  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

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\*\*\*\*\*78.75 \*\*\*\*\*78.75

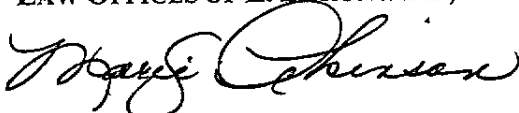
IN RE: FOOTSEAS MEDICAL, INC.

Enclosed you will find the original and one copy of the Articles of Incorporation and Designation and Acceptance of Resident Agent for Footseas Medical, Inc.. Also enclosed is our check number 4134 in the amount of \$78.75 to cover costs of registration fees and one certified copy. A self-addressed, stamped envelope is enclosed for your convenience in returning the certified copies to our office.

Thank you for your attention to this matter. Should you have any questions or require additional information, please don't hesitate to contact our office.

Sincerely,

LAW OFFICES OF L. BYRON REID, CHARTERED



Margie Atkinson  
Legal Assistant

/mna

Enclosures: As Stated



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DATE RA - last pg -  
delete signature

DATE 9/26/00  
DOC. EXAM 9/26/00

E-Mail: byronreid@i-1.net

PH 9/26/00

**ARTICLES OF INCORPORATION  
OF  
FOOTSEAS MEDICAL, INC.**

FILED  
00 SEP 21 AM 9:13  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

In compliance with the requirements of F.S. Chapter 607, the undersigned, being natural persons, hereby act as incorporators in adopting and filing articles of incorporation for the purpose of organizing a business corporation.

**ARTICLE I**

The name of this corporation is Footseas Medical, Inc.

**ARTICLE II**

The existence of the corporation shall begin on the date of filing of the Articles of Incorporation.

**ARTICLE III**

The street address of the principal office of the corporation is 56 Spires Lane, #14, Santa Rosa Beach, FL 32549.

**ARTICLE IV**

The maximum number of shares this corporation is authorized to issue is 10,000, par value \$1.00 per share, all of which shall be common stock. All common shares shall be identical with each other in every respect and the holders of common shares shall be entitled to one vote for each share on all matters on which shareholders have the right to vote.

**ARTICLE V**

The initial street address of the corporation's registered office is 109 Harrison Avenue, Panama City, Florida 32401. The initial registered agent for the corporation at that address is L. Byron Reid.

**ARTICLE VI**

The names and street addresses of the incorporators of these articles of incorporation are:

<u>Name</u>	<u>Address</u>
Sherrell R. Wilkerson, President	56 Spires Lane, #14 Santa Rosa Beach, FL 32549
Rose Wilkerson, Secretary/Treasurer	56 Spires Lane, #14 Santa Rosa Beach, FL 32549

The undersigned have executed these articles of incorporation on SEPTEMBER 6,  
~~August~~ \_\_\_\_, 2000.

Rose Wilkerson

Witness

Sherrell R. Wilkerson

Sherrell R. Wilkerson

[Signature]

Witness

STATE OF FLORIDA  
COUNTY OF BAY

SWORN TO AND SUBSCRIBED before me on SEPTEMBER 6, 2000 by Sherrell R. Wilkerson,  
who is personally known to me or has produced N/A as identification.



Margaret N. Atkinson  
MY COMMISSION # CC933831 EXPIRES  
June 19, 2004  
BONDED THRU TROY FAIN INSURANCE, INC.

[Signature]

Notary Public, State of Florida

Margaret N. Atkinson  
Printed Name of Notary

[Signature]

Witness

Rose Wilkerson

Rose Wilkerson

[Signature]

Witness

STATE OF FLORIDA  
COUNTY OF BAY

SWORN TO AND SUBSCRIBED before me on SEPTEMBER 6, 2000 by Rose Wilkerson, who  
is personally known to me or has produced N/A as identification.



Margaret N. Atkinson  
MY COMMISSION # CC933831 EXPIRES  
June 19, 2004  
BONDED THRU TROY FAIN INSURANCE, INC.

[Signature]

Notary Public, State of Florida

Margaret N. Atkinson  
Printed Name of Notary

**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

FILED

00 SEP 21 AM 9:13

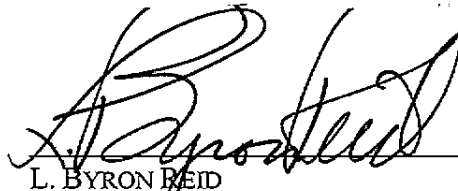
**UNDER THE PROVISIONS OF F.S. 607.0501, THE UNDERSIGNED CORPORATION, ORGANIZED  
UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN  
DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT IN THE STATE OF FLORIDA.**

CLERK OF STATE  
TALLAHASSEE, FLORIDA

1. The name of the corporation is Footseas Medical, Inc.
2. The name and address of the registered agent and office is:

L. Byron Reid  
Law Offices of L. Byron Reid, Chartered  
109 Harrison Avenue  
Panama City, FL 32401

Having been named as registered agent and to accept service of process for the above-named corporation at the place designated in this certificate, I accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept all the obligations of my position as registered agent.



L. BYRON REID  
109 Harrison Avenue  
Panama City, Florida 32401