

Division of Corporations

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Florida Department of State

Division of Corporations

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To:

Division of Corporations

Fax Number : (850)922-4001

From:

Account Name : MICHAEL S. SINGER, P.A.

Account Number : I19990000262

Phone : (561)626-2101

Fax Number : (561)626-4742

FILED
00 OCT -2 PM 4:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FLORIDA PROFIT CORPORATION OR P.A.

SAMUEL FALZONE, M.D., P.A.

| | |
|-----------------------|---------|
| Certificate of Status | 0 |
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T.SMITH OCT 02 2000

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ARTICLES OF INCORPORATION
OF
SAMUEL FALZONE, M.D., P.A.

The undersigned, incorporator(s) for the purpose of forming a corporation under the Florida General Corporation Act, hereby adopt(s) the following articles of incorporation:

ARTICLE ONE

The name of this corporation is SAMUEL FALZONE, M.D., P.A.

ARTICLE TWO

The corporation is to have perpetual existence.

ARTICLE THREE

The corporation may engage in any activity or business permitted under the Laws of the State of Florida and shall enjoy all the rights and privileges of a corporation granted by the Laws of the State of Florida. The specific nature of the business is to practice medicine.

ARTICLE FOUR

4.01 The aggregate number of shares which the corporation shall have the authority to issue is 500, all of which shall be common shares with a par value of \$1.00 per share.

4.02 The minimum amount of paid-in capital with which the corporation shall begin business shall be not less than Five Hundred Dollars (\$500.00).

ARTICLE FIVE

5.01 The street address of the initial corporate office of the corporation is 15578 Whispering Willow Drive, Wellington, FL 33414.

5.02 The name and address of the initial Registered Agent for this corporation to accept service of process within the State of Florida is Michael S. Singer, Esq., 1201 U.S. Highway One, Suite 240A, North Palm Beach, FL 33408.

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ARTICLE SIX

6.01 The name and address of the incorporator of this corporation is MICHAEL S. SINGER, ESQUIRE, 1201 U.S. Highway One, Suite 240A, North Palm Beach, FL 33408.

6.02 Said incorporator is over the age of eighteen (18) years; is sui juris, and is a citizen of the United States.

ARTICLE SEVEN

7.01 One (1) director shall constitute the initial Board of Directors of the corporation, but the Bylaws may provide for such increase or decrease in number thereof as is authorized by law.

7.02 The name and address of the members of the first Board of Directors are:

| <u>Name</u> | <u>Address</u> |
|----------------------|---|
| SAMUEL FALZONE, M.D. | 15578 Whispering Willow Drive Wellington, FL 33414 |

ARTICLE EIGHT

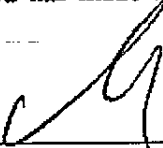
Nothing in these articles of incorporation shall be taken to limit the power of this corporation.

ARTICLE NINE

The effective date of this corporation shall be the filing date of these Articles of Incorporation.

IN WITNESS WHEREOF, the undersigned has made and subscribed these articles of incorporation this 2nd day of October, 2000.

By


MICHAEL S. SINGER
Incorporator

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STATE OF FLORIDA

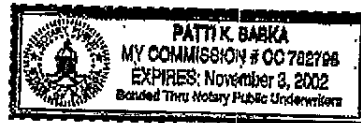
COUNTY OF PALM BEACH

Before me, the undersigned authority, personally appeared MICHAEL S. SINGER, to me to be the person described in and who subscribed the above and foregoing Articles of Incorporation; and who acknowledged that he made and subscribed the same for the purposes and uses set forth therein.

IN WITNESS WHEREOF, I have set my hand and affixed my official seal in the above-named County and State this 2nd day of October, 2000.

Patti K. Barka
Notary Public

My Commission Expires:



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STATE OF FLORIDA
DEPARTMENT OF STATE

Certificate Designating Place of Business or Domicile for the Service of Process Within
This State, Naming Agent Upon Whom Process May be Served and Names and
Addresses of the Officers and Trustees.

The following is submitted, in compliance with Chapter 48.091, Florida Statutes.

SAMUEL FALZONE, M.D., P.A., a corporation organized under the laws of the State of Florida, with its principal office at 15578 Whispering Willow Drive, Wellington, Florida 33414, has named MICHAEL S. SINGER, ESQ., of MICHAEL S. SINGER, P.A. located at 1201 U.S. Highway One, Suite 240A, North Palm Beach, Florida 33408, as its agent to accept service of process within this State.

| <u>NAME</u> | <u>OFFICERS</u> <u>TITLE</u> | <u>ADDRESS</u> |
|----------------------|---------------------------------|---|
| SAMUEL FALZONE, M.D. | President | |
| | Secretary/Treasurer | 15578 Whispering Willow Dr. Wellington, FL 33414 |

DIRECTORS

| | |
|----------------------|---|
| SAMUEL FALZONE, M.D. | 15578 Whispering Willow Dr. Wellington, FL 33414 |
|----------------------|---|

ACCEPTANCE:

I agree as Registered Agent to accept Service of Process; to keep the office open during prescribed hours; to post my name (and any other officers of said corporation authorized to accept service of process at the Florida designated address) in some conspicuous place in the office as required by law.



MICHAEL S. SINGER,
Registered Agent

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