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Emilio Del Valle, M.D.
3840 Colonial Boulevard, Suite 2
Fort Myers, Florida 33912
(941) 277-7666

EFFECTIVE DATE
1-1-01

FILED
OCT 30 AM 9:19
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

October 27, 2000

RE: EMILIO DEL VALLE, M.D., P.A.

Dear Sir or Madam,

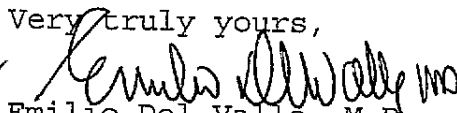
Enclosed please find the original and one copy of the articles of incorporation for my corporation EMILIO DEL VALLE, M.D., P.A. .

Also enclosed is my check for \$ 78.75 for a filing fee and a certified copy of the articles.

Additionally, I request that my corporation have a starting date of January 1st 2001.

If you have any questions, please do not hesitate to contact me.

Very truly yours,


Emilio Del Valle, M.D.

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*****78.75 *****78.75

Encl.

D. BROWN NOV - 1 2000

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

EFFECTIVE DATE

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ARTICLE I NAME

The name of the corporation shall be:

EMILIO DEL VALLE, M.D., P.A.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

3840 COLONIAL BOULEVARD, SUITE 2
FORT MYERS, FLORIDA 33912

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

THE PRACTICE OF MEDICINE.

ARTICLE IV SHARES

The number of shares of stock is:

100 SHARES OF \$1.00 (ONE DOLLAR) PAR VALUE COMMON STOCK

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

EMILIO DEL VALLE, MD, PRESIDENT
3840 COLONIAL BOULEVARD, SUITE 2
FORT MYERS, FLORIDA 33912

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

EMILIO DEL VALLE, MD
3840 COLONIAL BOULEVARD, SUITE 2
FORT MYERS, FLORIDA 33912

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

EMILIO DEL VALLE, MD
3840 COLONIAL BLVD., SUITE 2
FORT MYERS, FLORIDA 33912

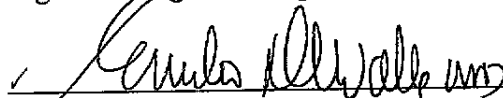
ARTICLE VIII EFFECTIVE DATE

THE EFFECTIVE DATE OF THIS
CORPORATION SHALL BE
JANUARY 1ST, 2001

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

10/27/00
Date


Signature/Incorporator

10/27/00
Date