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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 : CAPITAL CONNECTION, INC.
Account Number : I20000000257
Phone : (850)224-8870
Fax Number : (850)222-1222

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TALLAHASSEE, FLORIDA

FLORIDA PROFIT CORPORATION OR P.A.

MICHAEL GERALDI M.D., P.A.

Certificate of Status	0
Certified Copy	1
Page Count	01
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Capital Connection, Inc.

N. Culligan NOV 13 2000

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ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

MICHAEL GERALDI M.D., P.A.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

11246 SW 131 AVENUE
MIAMI, FLORIDA 33186

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

PEDIATRIC MEDICAL SERVICES

ARTICLE IV SHARES

The number of shares of stock is:

500 SHARES

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

MICHAEL GERALDI
11246 SW 131 AVENUE
MIAMI, FLORIDA 33186

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TALLAHASSEE, FLORIDA

ARTICLE VI REGISTERED AGENT

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

MICHAEL GERALDI
11246 SW 131 AVENUE
MIAMI, FLORIDA 33186

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

MICHAEL GERALDI
11246 SW 131 AVENUE
MIAMI, FLORIDA 33186

****

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

Michael Geraldi
Signature/Registered Agent — Date: 11/9/00

Michael Geraldi
Signature/Incorporator — Date: 11/9/00

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