

PO1000018226

CORPORATE ACCESS, INC.

236 East 6th Avenue . Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666 . Fax (850) 222-1666

WALK IN

PICK UP 2/19/01 11:00

CERTIFIED COPY

CUS

X PHOTO COPY

X FILING Article

SECRETARY OF STATE
TALLAHASSEE FLORIDA
01 FEB 19 PM 12:10
FILED

1.) MedX.md, Inc.
(CORPORATE NAME & DOCUMENT #)

500003-18995--6
-02/19/01--01087--002
*****70.00 *****70.00

2.)
(CORPORATE NAME & DOCUMENT #)

3.)
(CORPORATE NAME & DOCUMENT #)

4.)
(CORPORATE NAME & DOCUMENT #)

5.)
(CORPORATE NAME & DOCUMENT #)

RECEIVED
01 FEB 19 AM 11:00
DIVISION OF CORPORATION

SPECIAL INSTRUCTIONS

T. SMITH FEB 19 2001

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2

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

MedX . md , Inc

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

111 Second Avenue Northeast, Suite 1601
Saint Petersburg, FL 33701

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

1,000,000

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

E. Beaugard
111 Second Avenue Northeast, Suite 1601
Saint Petersburg, FL 33701

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

E. Beaugard
111 Second Avenue Northeast, Suite 1601
Saint Petersburg, FL 33701


Signature/Incorporator

2/16/01
Date

(An additional article must be added if an effective date is requested.)

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby 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 the obligations of my position as registered agent


Signature/Registered Agent

2/16/01
Date

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