

Division of Corporations

Page 1 of 2

P01000028063

Florida Department of State
Division of Corporations
Public Access System
Katherine Harris, Secretary of State

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H01000028103 9)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:
Division of Corporations
Fax Number : (850) 922-4001

From:
Account Name : DAVID R. PATTERSON
Account Number : I20000000109
Phone : (407) 752-7720
Fax Number : (407) 752-7705

FLORIDA PROFIT CORPORATION OR P.A.
PODIATRY AND WOUND CARE SERVICES, INC.

Certificate of Status	0
Certified Copy	1
Page Count	03 (4)
Estimated Charge	\$78.75

FILED
01 MAR 19 PM 1:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

B. McKnight MAR 19 2001

H01000028103 9

ARTICLES OF INCORPORATION

OF

PODIATRY AND WOUND CARE SERVICES, INC.

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

ARTICLE I NAME

The name of the corporation shall be:

PODIATRY AND WOUND CARE SERVICES, INC.

ARTICLE II PRINCIPAL OFFICE

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

2637 LOWELL CIRCLE
MELBOURNE, FL 32935

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 100 shares of common stock with a \$1.00 par value.

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

GEORGE O MABRY DPM
2637 LOWELL CIRCLE
MELBOURNE, FL 32935

FILED
01 MAR 19 PM 1:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

H01000028103 9

FROM : S D ENTERPRISES OF BRE

FAX NO. : 3217527705

Mar. 19 2001 12:36PM P3

H01000028103 9

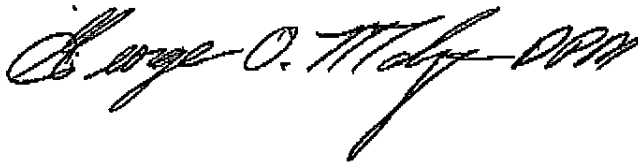
ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

GEORGE O MABRY, PRESIDENT
2637 LOWELL CIRCLE
MELBOURNE, FL 32935

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this 29TH day of SEPTEMBER 2000.

Signature

A handwritten signature in cursive script, appearing to read "George O. Mabry", written in dark ink.

H01000028103 9

H01000028103 9

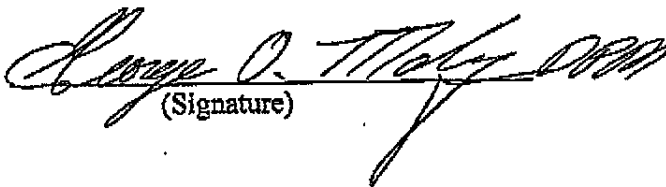
**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 OR 617.0501, FLORIDA STATUTES, 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.

1. The name of the corporation is: **PODIATRY AND WOUND CARE SERVICES, INC.**
2. The name and address of the registered agent and office is:

**GEORGE O MABRY DPM
2637 LOWELL CIRCLE
MELBOURNE, FL 32935**

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)

FILED
01 MAR 19 PM 1:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

H01000028103 9