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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Florida Department of State  
Division of Corporations  
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Katherine Harris, Secretary of State

EFFECTIVE 06-15-01

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To:

Division of Corporations  
Fax Number : (850) 205-0381

From:

Account Name : LORN LEITMAN, C.P.A.  
Account Number : 119980000088  
Phone : (305) 279-8943  
Fax Number : (305) 271-4421

**FLORIDA PROFIT CORPORATION OR P.A.**

**Physicians Financial Services, Inc.**

<https://ccfssl.dos.state.fl.us/scripts/efilcovr.exe>

6/15/01

C. BLALOCK JUN 20 2001

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EFFECTIVE DATE  
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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ARTICLES OF INCORPORATION  
OF  
PHYSICIANS FINANCIAL SERVICES, INC.

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

ARTICLE I

The name of the corporation is Physicians Financial Services, Inc.

ARTICLE II

The term of the existence of the corporation is perpetual. The inception date of the corporation and the day it began operations is June 15, 2001.

ARTICLE III

The general purposes for which the corporation is to engage or transact in any or all lawful activities or business permitted under the laws of the United States, the State of Florida or any other state, country, territory, or nation.

ARTICLE IV

The aggregate number of shares of stock which the corporation is authorized to issue is One Hundred (100).

ARTICLE V

The street address of the initial registered office and the principal place of business of the corporation is 7700 North Kendall Drive, Suite 405i, Miami, FL 33156, and the name of the agent at such address is : Lorn Leitman.

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ARTICLE VI

The number of directors constituting the initial board of directors of the corporation is Two (2). The name and address of the person/persons who is/are to serve as initial board are:

<u>Name</u>	<u>Address</u>
<u>Lorn Leitman</u>	7700 North Kendall Drive Suite 405 Miami, FL 33156
<u>Irvin Joseph</u>	1810 NE 198 Terrace North Miami Beach, FL 33179

ARTICLE VII

The name and address of the person signing these articles of Incorporation is:

<u>Name</u>	<u>Address</u>
<u>Lorn Leitman</u>	7700 North Kendall Drive Suite 405 Miami, FL 33156

Executed by the undersigned at Miami, Dade County, Florida on this 15<sup>th</sup>  
day of JUNE, 2001.

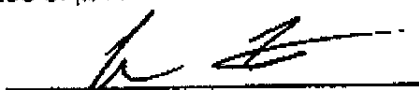
  
\_\_\_\_\_  
Lorn Leitman

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ACCEPTANCE BY REGISTERED AGENT:

Having been named to accept service of process for the above named corporation at a place designated in these Articles of Incorporation, I hereby accept to act in this capacity, and agree to comply with the provision of Chapter 48.091, Florida Statutes, relative to keeping open said office for service of process.



Lorn Leitman

STATE OF FLORIDA)

COUNTY OF DADE ) : SS :

Before me, the undersigned authority, personally appeared Lorn Leitman to me well known to be the person who executed the foregoing ARTICLES OF INCORPORATION and acknowledged before me, according to law, that he made and subscribed the same for the purposes therein mentioned and set forth

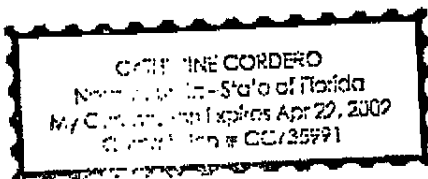
IN WITNESS WHEREOF, I have hereunto set my hand and seal this 15<sup>th</sup> day of June, 2001.



Notary Public, State of Florida, at Large

My Commission Expires:

April 22, 2002



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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**CERTIFICATE DESIGNATION (OR CHANGING) PLACE OF BUSINESS OR DOMICILE FOR  
THE SERVICE OF PROCESS WITHIN THIS STATE, NAMING AGENT UPON WHOM PROCESS  
MAY BE SERVED.**

In pursuance of Chapter 607.34 Florida Statutes, the following is submitted, in  
compliance with said Act:

First - That Physicians Financial Services, Inc. desiring to organize under the laws of the  
State of Florida with its principal office, as indicated in the articles of  
incorporation at City of \_\_\_\_\_

County of Miami-Dade State of Florida

has named Lorn Leitman  
(Name of Registered Agent)

located at 7700 North Kendall, Suite 405

City of Miami County of Miami-Dade

State of Florida, as its agent to accept service of process within this state.



**ACKNOWLEDGMENT: (MUST BE SIGNED BY DESIGNATED AGENT)**

Having been named to accept service of process for the above stated corporation, at  
place designated in this certificate, I hereby accept to act in this capacity, and agree  
to comply with the provision of said Act relative to keeping open said office.

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