

*Healthcare*  
**FACILITATORS**

**PO1000065168**

June 26, 2001

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

000004449630--5  
-06/28/01--01052--006  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

Dear Division of Corporations:

Healthcare Facilitators on behalf of Gastroenterology and Nutrition Specialist P.A has been requested to submit the attached Articles of Incorporation.

I have also attached a check to incorporate Gastroenterology and Nutrition Specialist P.A in the State of Florida.

If you have any questions or require additional information, please contact my office.

Thank you.

Sincerely,



Fran LaVallette  
Facilitator

**FILED**  
01 JUN 28 AM 10:32  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

## 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:

Gastroenterology and Nutrition Specialist P.A.

### ARTICLE II PRINCIPAL OFFICE

The principal place of business/ mailing address is:

6628 Winder Lynn Lane  
Orlando, Florida 32819

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Gastroenterology medical practice

### ARTICLE IV SHARES

The number of shares of stock is:

10,000 shares

### ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

Muhammad A. Mohiuddin MD.  
6628 Winder Lynn Lane  
Orlando, Florida 32819

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

01 JUN 28 AM 10:32

FILED

### ARTICLE VI REGISTERED AGENT

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

Muhammad A. Mohiuddin MD  
6628 Winder Lynn Lane  
Orlando, Florida 32819

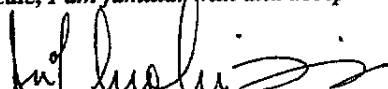
### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

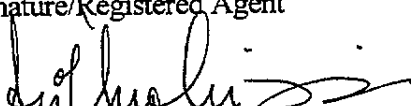
Muhammad A. Mohiuddin MD  
6628 Winder Lynn Road  
Orlando, Florida 32819

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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

6/25/01  
Date

  
\_\_\_\_\_  
Signature/Incorporator

6/25/01  
Date