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FLORIDA PROFIT CORPORATION OR P.A.

DOCTORS OWN CHOICE, INC.

Certificate of Status	1
Certified Copy	1
Page Count	05
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ARTICLES OF INCORPORATION

OF

DOCTORS OWN CHOICE, INC.

a Florida corporation

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

ARTICLE I

CORPORATE NAME

The name of the corporation is DOCTORS OWN CHOICE, INC. (the "Corporation").

ARTICLE II

PRINCIPAL OFFICE

The principal place of business and mailing address of the Corporation shall be 1133 Bal Harbor, #1127, Punta Gorda, Florida 33950.

ARTICLE III

CAPITAL STOCK

The Corporation is authorized to issue One Thousand (1,000) shares in the aggregate, which shares shall be of a single class of common stock and each shall have no par value.

ARTICLE IV

INITIAL REGISTERED AGENT AND STREET ADDRESS

The street address of the initial registered agent of the Corporation is 850 Park Shore Drive, Naples, Florida 34103, and the name of its initial registered agent at such address is Michael W. McArdle.

Audit No. H01000078060 0

ARTICLE V

SOLE INCORPORATOR

The name and address of the sole incorporator is Michael W. McArdle, 850 Park Shore Drive, Naples, Florida 34103.

ARTICLE VI

DURATION

The duration of the Corporation is perpetual commencing upon the filing of these Articles of Incorporation with the Secretary of the State of Florida.

ARTICLE VII

BYLAWS

The power to adopt, alter, amend or repeal Bylaws shall be vested in the Board of Directors.

ARTICLE VIII

INDEMNIFICATION

The Corporation shall indemnify any officer and/or director, or any former officer and/or director to the full extent of the law.

IN WITNESS WHEREOF, for the purpose of forming this Corporation under the laws of the State of Florida, the undersigned, constituting the sole incorporator of this Corporation, has executed these Articles of Incorporation this 2nd day of July, 2001.

INCORPORATOR

fichael W. McArdle

Audit No. H01000078060 0

Audit NO. H01000078060 0

STATE OF FLORIDA)	
COUNTY OF COLLIER)SS:)	-
The foregoing instru Michael W. McArdle, who (A	ment was acknowledged before me this 2 nd day of July, 2001 is personally known to me, or who () has producedon.	by

NOTARY PUBLIC, STATE OF FLORIDA

Name:

(Type or Print)
My Commission Expires:

Kathleen A. Famulare Commission # 00 853842 Expires July 12, 2003 Bonded Thru Atlantia Bonding Co., Iso.

Audit No. H01000078060 0

CERTIFICATE OF DESIGNATION

REGISTERED AGENT/REGISTERED OFFICE

In compliance with Section 607.0501, Florida Statutes, the following is submitted:

That **DOCTORS OWN CHOICE, INC.**, desiring to organize or qualify under the laws of the State of Florida, with its principal place of business at the City of Naples, State of Florida, has named Michael W. McArdle, 850 Park Shore Drive, Naples, Florida 34103, as its agent to accept service of process within Florida.

DOCTORS OWN CHOICE, INC.

a Florida corporation

By: Michael W. McArdle, Incorporator

Dated July 2, 2001

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.

Michael W. McArdle

Dated: July 2, 2001

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Audit No. H01000078060 0

4