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Requester's Name

FILED

01 JUL 11 PM 4:24

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

REFERENCE NUMBER	
PLASTIC SURGERY HAMP	
TELEPHONE	941-593-0551
CAROL FREDERICK	
PRACTICE MGMT CONSULTANTS	
10661 N AIRPORT RD STE 16	
NAPLES	FL 34109

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. _____
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

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| <input type="checkbox"/> Walk in | <input type="checkbox"/> Pick up time _____ | <input type="checkbox"/> Certified Copy |
| <input type="checkbox"/> Mail out | <input type="checkbox"/> Will wait | <input type="checkbox"/> Certificate of Status |
| <input type="checkbox"/> Photocopy | | |

NEW FILINGS

- ☐ Profit
- ☐ Not for Profit
- ☐ Limited Liability
- ☐ Domestication
- ☐ Other

AMENDMENTS

- ☐ Amendment
- ☐ Resignation of R.A., Officer/Director
- ☐ Change of Registered Agent
- ☐ Dissolution/Withdrawal
- ☐ Merger

OTHER FILINGS

- ☐ Annual Report
- ☐ Fictitious Name

REGISTRATION/QUALIFICATION

- ☐ Foreign
- ☐ Limited Partnership
- ☐ Reinstatement
- ☐ Trademark
- ☐ Other

Examiner's Initials

CR2E031(7/97)

G. BLALOCK JUL 12 2001

**ARTICLES OF INCORPORATION
OF
PLASTIC SURGERY PAMPERING, INC.**

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The undersigned, for the purpose of forming a corporation under the Florida Business

Corporation Act hereby adopt the following articles of incorporation:

ARTICLE I

NAME

The name of the corporation is **PLASTIC SURGERY PAMPERING, INC.**

ARTICLE II

DURATION

The term of existence of the corporation is perpetual.

ARTICLE III

PURPOSE

The corporation is formed to provide nursing services to post-op patients and to transact any and all lawful business for which corporations may be incorporated under the Florida Business Corporation Act.

ARTICLE IV

CAPITAL STOCK

The aggregate number of shares which the corporation has authority to issue is 7,500, all of which shall be common shares with a par value of \$1.00.

ARTICLE V

PRINCIPAL OFFICE, REGISTERED OFFICE & MAILING ADDRESS

The principal place of business and mailing address of the corporation is 23640 Walden Center Drive, #310, Bonita Springs, Florida 34134. The name of the initial registered agent is Tracy Schaal and the Registered office at 23640 Walden Center Drive, #310, Bonita Springs, FL 34134. The registered offices' phone number is 941.273.6432

ARTICLE VI

MANAGEMENT

The business of the corporation shall be managed by the stockholders of the corporation rather than by a board of directors.

ARTICLE VII

INCORPORATORS, SUBSCRIBERS, STOCKHOLDERS AND OFFICERS

The initial subscribers, stockholders and officers are:

Tracy Schaal	President
23640 Walden Center Drive #310	
Bonita Springs, FL 34134	

ARTICLES VIII

COMMENCEMENT OF EXISTENCE

The corporation shall be deemed to commence its existence when these Articles are filed with the office of the Secretary of State, State of Florida.

IN WITNESS WHEREOF, I have subscribed my name this 10th day of

July, 2001.



TRACY SCHAAL, PRESIDENT

STATE OF FLORIDA

COUNTY OF LEE

On this 10th day of July, 2001, before me personally
appeared TRACY SCHAAL, Florida Drivers License Number S40081270680-0
known to me to be the persons whose name is subscribed to the within instrument, and
acknowledged that they executed the same for the purpose therein contained.

IN WITNESS WHEREOF, I hereunto set my hand and official seal.

C. Fredlund
Notary Public CC744734
My Commission Expires: 9/13/02

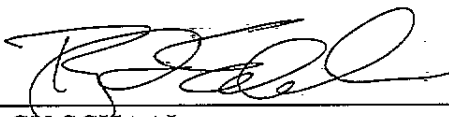
**CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR
THE SERVICE OF PROCESS WITHIN THIS STATE, NAMING AGENT UPON
WHICH PROCESS MAY BE SERVED**

Pursuant to the provisions of section 607.0501 or 617.0501, Florida Statutes, the following is submitted in compliance with said act:

That, desiring to organize under the laws of the State of Florida with its principal office, as indicated in the Articles of Incorporation, in the County of COLLIER, State of Florida, has named TRACY SCHAAL, located at 23640 WALDEN CENTER DRIVE, #310, County of LEE, State of Florida, as its agent to accept service of process within this State.

ACKNOWLEDGEMENT

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 proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.



TRACY SCHAAL

July 10, 2001
Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA