TRANSMITTAL LETTER

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

SUBJECT:	RYLIE, INC.			
	(PROPOSED CORPORA	FE NAME – <u>MUST INCL</u>	UDE SUFFLX)	
		ê	20000447 -07/16/01- *****70.0	77728 01100004 00 *****70.00
Enclosed is an origina	al and one(1) copy of the article	s of incorporation and a	check for:	
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy ADDITIONAL CO	□ \$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED	
FROM:	Mark Kesler	M.D.		
	10237 Cove I A Orlando, FL City, S 407/370-4689	32836 State & Zip	SECRETARY OF STATE TALLAHASSEE FLORIDA	01 JUL 16 AM 9: 50
	Daytime Telephone number			

NOTE: Please provide the original and one copy of the articles.

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:
RYLIE, INC.
ARTICLE II PRINCIPAL OFFICE

10237 Cove Lake Drive Orlando, FL 32836

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

The principal place of business/mailing address is:

To provide consulting services to child health care and related entities

ARTICLE IV SHARES

The number of shares of stock is:

5,000 shares of \$1.00 par value each <u>ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)</u> The name(s) and address(es):

Mark Kesler, M.D. (Pres., V.P., Sec., Treas.) 10237 Cove Lake Drive Orlando, FL 32836

ARTICLE VI REGISTERED AGENT

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

Kathleen T. Murphy, Esq. 7695 S.W. 104 Street - Suite 200 Miami, FL 33156

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Mark Kesler, M.D. 10237 Cove Lake Drive -Orlando, FL 32836

Having been named as registered agent to accept service of process for the above stated corporation at the place designated i certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity	in this

Signature/Incorporator

Mark Kegler

Certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

| KATHLEEN MURPHY 3/26/0,
| Date | T/1/0|
| Date | T/9/0|