

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

Dear Division of Corporations:

Healthcare Facilitators has been requested by K. Jean-Charles MD P.A to submit the attached Articles of Incorporation and payment for incorporation.

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

Thank you.

Sincerely,

Fran LaVallette Facilitator

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820 Grovesmere Loop • Ocoee, Florida 34761

Office: (407) 654-2284 • Fax: (407) 877-9944 • email: info@hcf.net

Web Site: www.hcf.net

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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:

K. Jean-Charles MD P.A

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

820 Grovesmere Loop Ocoee, Florida 34761

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ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Medical practice specializing in family 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):

K. Jean-Charles MD 820 Grovesmere Loop Ocoee, Florida 34761

ARTICLE VI REGISTERED AGENT

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

Healthcare Facilitators 820 Grovesmere Loop Ocoee, Florida 34761

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

K. Jean-Charles MD 820 Grovesmere Loop Ocoee, Florida 34561

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

Date

12/25/

1/21/02

Signature/Incorporator

Date