

**Electronic Articles of Incorporation  
For**

**P02000039122  
FILED  
April 10, 2002  
Sec. Of State**

NORTH FLORIDA ARTHRITIS CLINIC P.A

The undersigned incorporator, for the purpose of forming a Florida profit corporation, hereby adopts the following Articles of Incorporation:

**Article I**

The name of the corporation is:

NORTH FLORIDA ARTHRITIS CLINIC P.A

**Article II**

The principal place of business address:

4551 WEST US 90  
SUITE 102  
LAKE CITY, FL. 32055

The mailing address of the corporation is:

1502 NW 90TH TERRACE  
GAINESVILLE, FL. 32606

**Article III**

The purpose for which this corporation is organized is:

MEDICAL PRACTICE

**Article IV**

The number of shares the corporation is authorized to issue is:

1000

**Article V**

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

RIZWAN MANSOOR  
1502 NW 90TH TERRACE  
GAINESVILLE, FL. 32606

I certify that I am familiar with and accept the responsibilities of  
registered agent.

Registered Agent Signature: RIZWAN MANSOOR

**Article VI**

The name and address of the incorporator is:

RIZWAN MANSOOR MD  
1502 NW 90TH TERRACE  
GAINESVILLE , FL, 32606

Incorporator Signature: RIZWAN MANSOOR