

Subj: Incorporation of PENINSULA MEDICAL CLAIMS MANAGEMENT, INC. Dear Sir:

Enclosed please find the following:

1. The original and one copy of the Articles of Incorporation for the subject corporation. Please certify one copy and return it to the undersigned.

2. My check in the amount of \$78.75 to cover the filing fees. 300006100113--4 -06/28/02--01033--009\_

3. Designation of Resident Agent.

Kindly acknowledge filing of these Articles of Incorporation in compliance with Florida law and return the certified copy of the Articles of Incorporation to the undersigned at Atlantic Paralegal Services, Inc., 1592 N. HWY A1A, Satellite Beach, FL 32937. Telephone Number (321) 773-2020.

Thank you for your assistance in this matter.

Sincerely,

Michael Sarro

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ARTICLES OF INCORPORATION

OF

PENINSULA MEDICAL CLAIMS MANAGEMENT, INC.

ARTICLE I. NAME The name of this corporation is PENINSULA MEDICAL CLAIMS MANAGEMENT, INC. ARTICLE II. DURATION This corporation shall have perpetual existence. ARTICLE III. PURPOSE

This corporation is organized for the purpose of transacting any or all lawful business.

ARTICLE IV. CAPITOL STOCK

This corporation is authorized to issue 10,000 shares of \$1.00 par value common stock, which shall be designated "common shares".

ARTICLE V. PREEMPTIVE RIGHTS

Every shareholder, upon the sale for cash of any new stock of this corporation of the same kind, class or series as that which he already holds, shall have the right to purchase his pro rata share (as nearly as may be done without issuance of fractional shares) at the price at which it is offered to others.

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NISTON OF CONFORMATION

ARTICLE VI. INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office of this corporation is 708 Medinah Road, Melbourne, Florida 32940 and the name of the initial registered agent of this corporation at that address is Michael Sarro.

ARTICLE V. INITIAL BOARD OF DIRECTORS

This corporation shall have one director initially. The number of directors may be either increased or diminished from time to time by the bylaws but shall never be less than one. The name and address of the initial director of this corporation is:

> MICHAEL SARRO 708 Medinah Road Melbourne, Florida 32940

ARTICLE VIII. PRINCIPAL OFFICE AND MAILING ADDRESS The principal office of the corporation is located at 708 Medinah Road, Melbourne, Florida 32940 and the mailing address of the corporation is 708 Medinah Road, Melbourne, Florida 32940.



## ARTICLE IX. INCORPORATOR

The name and address of the person signing these articles is:

MICHAEL SARRO 708 Medinah Road Melbourne, Florida 32940

ARTICLE X. AMENDMENTS

This corporation reserves the right to amend or repeal any provision contained in these Articles of Incorporation, or any amendment hereto, by a majority vote of the Board of Directors, and any right conferred upon the shareholders is subject to this reservation.

IN WITNESS WHEREOF the undersigned subscriber has executed these Articles of Incorporation on this 25th day of June, 2002.

STATE OF FLORIDA COUNTY OF BREVARD

I HEREBY CERTIFY that on this day, before me, a Notary Public duly authorized in the State and County named above to take acknowledgments, personally appeared MICHAEL SARRO, to me known to be the person described as subscriber in and who executed the foregoing Articles of Incorporation, and who acknowledged before me that he subscribed to those Articles of Incorporation.

WITNESS my hand and official seal in the County and State named above this 25th day of June, 2002. PUDL5600-540-49-46/-0

san Notary Public



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## DESIGNATION AS REGISTERED AGENT

In compliance with Section 48.091, and Section 607.034, Florida Statutes, the following is submitted:

That PENINSULA MEDICAL CLAIMS MANAGEMENT, INC., desiring to organize under the laws of the State of Florida, with its principal office at 708 Medinah Road, Melbourne, Florida, Brevard County, Florida 32940 has named Michael Sarro located at 708 Medinah Road, Melbourne, Florida, Brevard County, Florida 32940 as its agent to accept service of process within this state.

ACKNOWLEDGMENT :

Having been named to accept service of process for the above named Corporation, at the place designated in this certificate, the undersigned agrees to act in this capacity, and agrees to comply with the provisions of Florida law relative to keeping the designated office open.

Registered Agent

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