P0200093911

DEPARTMENT OF STATE ACCOUNT FILING COVER SHEET

Account Number	FCA00000017	02 TAL	
Reference: (Sub Account) Date:	8/29/02	FILED AUG 29 PH CRETARY OF LAHASSEE, I	
Requestor Name:	Carlton Fields	PN IZ: I	
Address:	Post Office Box 190 Tallahassee, Florida 32302	— 1	
Telephone:	(850) 224-1585	5000074178059 (x261)	
Contact Name:	Kim Pullen, CLA (x261)		
Corporation Name:	Alison Calkins, M.D.	, ρ.Α	
Entity Number:			
Authorization:	Line Kellen	.,	
Certified Copy New Filings Fictitious Name		Certificate of Status Annual Report Registration	
(X) Call When Ready	(X) Call if Problem () Aft	er 4:30	
(X) Walk In	() Will Wait (X) Pick Up		
	13 % MA &S SUA SO		
CF Internal Use Only Client: 4669	BECEINED		
Name: Jan Wheaton		==	
TAL#501656.01		n 8/29	

ARTICLES OF INCORPORATION OF ALISON CALKINS , M.D., P.A.

The undersigned, acting as incorporator of a corporation under the Florida Professional Service Corporation Act, adopts the following articles of incorporation for such corporation:

ARTICLE I Name

The name of the corporation is: ALISON CALKINS, M.D., P.A.

ARTICLE II Mailing Address

The mailing address is: 7302 North Ola Avenue, Tampa, FL 33604.

FILED 02 AUG 29 PM 12: 17 SECRETARY OF STATE TAILAHASSEE, FLORIDA

ARTICLE III Nature of Business

The Corporation is organized to engage in every aspect of the business of rendering the professional medical services to the public that a physician, duly licensed under the laws of the State of Florida, is authorized to render, but such professional medical services shall be rendered only through officers, employees, and agents of the Corporation who are duly licensed under the laws of the State of Florida to render such services, and to engage in any and all other lawful business.

ARTICLE IV Stock

The Corporation shall have authority to issue 1,000 shares of \$.01 par value common stock.

ARTICLE V Initial Registered Agent and Office

The street address of its initial registered office is 777 South Harbour Island, Tampa, FL 33602, and the name of its initial registered agent at that address is CFRA, LLC.

ARTICLE VI Incorporator

The name and address of the incorporator are:

<u>Name</u> <u>Address</u>

Michael J. Nolan Carlton Fields, P.A. P. O. Box 3239

Tampa, Florida 33601-3239

ARTICLE VII Initial Director

The corporation shall have one (1) director initially. The name and address of the initial director:

Name

Address

Alison Calkins

7302 North Ola Avenue Tampa, FL 33604

ARTICLE VIII Shareholders

Shares of the Corporation's capital stock shall be issued only to individuals who are duly licensed to render services as a physician under the laws of the State of Florida. No shareholder of the Corporation may sell or transfer his or her shares of stock therein except to another individual who is eligible to be a shareholder of the Corporation.

ARTICLE IX Voting Trusts

No shareholder of the Corporation shall enter into a voting trust agreement or any other type of agreement vesting in another person the authority to exercise the voting power of any or all of his shares.

Dated this 29 day of August, 2002.

Michael J. Nolan

Incorporator

ACCEPTANCE BY REGISTERED AGENT

Having been named to accept service of process for the above stated corporation, at the place designated in these Articles of Incorporation: (i) I agree to act in this capacity; (ii) I agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties; and (iii) I accept the duties and obligations of acting as registered agent pursuant to Section 607.0505 of the Florida Business Corporation Act.

Dated this 28¹⁷ day of August, 2002.

CFRA, LLÇ., a Florida limited liability company

Michael J. Nolan, Member

Registered Agent

OZ AUG 29 PN 12: 17
SEGRETARY OF STATE
SEGRETARY OF STATE
SEGRETARY OF STATE