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Michele Bertoldi
Requestor's Name

1331 East Lafayette Street, Suite B
Address

Tallahassee, FL 32301
City/State/Zip

Phone # 942-0080

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CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. Forte Medical Consultants
(Corporation Name) (Document #)

2. _____
(Corporation Name) (Document #)

3. _____
(Corporation Name) (Document #)

4. _____
(Corporation Name) (Document #)

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	NEW FILINGS
✓	Profit
	NonProfit
	Limited Liability
	Domestication
	Other

	AMENDMENTS
	Amendment
	Resignation of R.A., Officer/ Director
	Change of Registered Agent
	Dissolution/Withdrawal
	Merger

	OTHER FILINGS
	Annual Report
	Fictitious Name
	Name Reservation

	REGISTRATION/ QUALIFICATION
	Foreign
	Limited Partnership
	Reinstatement
	Trademark
	Other

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ARTICLES OF INCORPORATION

OF

FORTE MEDICAL CONSULTANTS, INC.

The undersigned subscriber to these Articles of Incorporation, a natural person competent to contract, hereby forms a corporation under the laws of the state of Florida.

ARTICLE I: NAME

The name of the corporation shall be:

FORTE MEDICAL CONSULTANTS, INC.

ARTICLE II: NATURE OF BUSINESS

This corporation may engage or transact in any or all lawful activities or business permitted under the laws of the United States, the State of Florida, or any other state, country, territory or nation.

ARTICLE III: CAPITAL STOCK

The maximum number of shares of stock that this corporation is authorized to have outstanding at any one time is 100 shares of common stock having a par value of $1 per share.

ARTICLE IV: ADDRESS

The street address of the initial registered office of the corporation shall be 1331 East Lafayette Street, Suite B, Tallahassee, Florida 32301 and the name of the initial registered agent of the corporation at that address is Michele A. Bertoldi.

ARTICLE V: TERM OF EXISTENCE

This corporation is to exist perpetually.

ARTICLE VI: SPECIAL PROVISION

It is the intent of the incorporater that the corporation will qualify under Section 1244 of the Internal Revenue Code and that the corporation will file as a Subchapter S Corporation.

ARTICLE VII: SUBSCRIBER

The name and street address of the subscriber to these articles of incorporation is Michele A. Bertoldi, 1331 East Lafayette Street, Suite B, Tallahassee, Florida 32301.

In witness whereof, the undersigned has hereunto set his hand and seal on this 13th day of September, 2002.

ARTICLE VIII: DIRECTORS

This corporation shall have two (2) directors, initially. The names and street addresses of the initial members of the Board of Directors are:

Michele A. Bertoldi	1331 East Lafayette Street, Suite B Tallahassee, Florida 32301
Lianne Jesberg	Same

ARTICLE IX: OFFICERS

The names and addresses of the initial officers of the corporation who shall hold office for the first year of the coproation, or until thier successors are elected or appointed are:

Michele A. Bertoldi Director	1331 East Lafayette Street, Suite B Tallahassee, Florida 32301
Lianne Jesberg Director	Same

Michele Bertoldi

Michele A. Bertoldi
Subscriber

STATE OF FLORIDA,
COUNTY OF LEON.

The foregoing instrument was acknowledged before me this 13th day of September, 2002, by:

_____
NOTARY PUBLIC

MY COMMISSION EXPIRES:_____

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TALLAHASSEE, FLORIDA

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT

FOR

FORTE MEDICAL CONSULTANTS, INC.

Pursuant to the provisions of Section 607.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered agent in the state of Florida.

1. The name of the corporation is:

FORTE MEDICAL CONSULTANTS, INC.

2. The name and address of the registered agent and office is:
THIS IS ALSO THE PRINCIPAL ADDRESS.

Michele A. Bertoldi
1331 East Lafayette Street - Suite B
Tallahassee, Florida 32301

Having been named as registered agent and to accept service of process on this 13th day of September, 2002, for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Michele Bertoldi

Michele A. Bertoldi
Registered Agent