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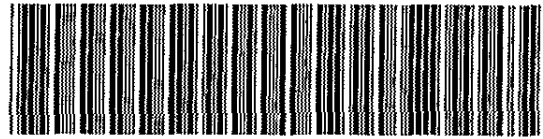
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D. WHITE OCT 28 2002

**DAVID P. FITCH**  
Attorney at law

**TRANSMITTAL LETTER**

**October 23, 2002**

Department of State  
Division of Corporations  
Corporate Filings  
P.O. Box 6327  
Tallahassee, FL 32314

**SUBJECT:** Sheryl O. Thompson, MD, P.A.

**FROM:**

David P. Fitch  
David P. Fitch, Attorney at Law  
12230 Forest Hill Blvd., Suite 110V  
Wellington, Florida 33414

For further information concerning this matter, please call David P. Fitch at (561) 227-1549.

Enclosed are an original and two (2) copies of the articles of incorporation and a check for:

\$87.50 for Filing Fee, Certificate of Status & Certified Copy

Sincerely,



David P. Fitch

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TALLAHASSEE, FLORIDA

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**ARTICLES OF INCORPORATION  
OF  
SHERYL O. THOMPSON, MD, P.A.**

In compliance with the requirements of F.S. Chapter 607 and 621, the undersigned hereby acts as an incorporator in adopting and filing the following articles of incorporation for the purpose of organizing a business corporation.

**ARTICLE I**

The name of this corporation is: Sheryl O. Thompson, MD, P.A..

**ARTICLE II**

The street address of the principal place of business of the corporation is: 16760 Orange Boulevard, Loxahatchee, FL 33470.

**ARTICLE III**

The specific purpose for which the corporation is organized is: the delivery of services by a medical doctor.

**ARTICLE IV**

The maximum number of shares this corporation is authorized to issue is 10,000, par value \$.01 per share, all of which shall be common shares. All common shares shall be identical with each other in every respect and the holders of common shares shall be entitled to one vote for each share on all matters on which shareholders have the right to vote.

**ARTICLE V**

The initial street address of the corporation's registered office is: 16760 Orange Boulevard, Loxahatchee, Florida, 33470. The initial registered agent for the corporation at that address is: Dr. Sheryl O. Thompson.

## ARTICLE VI

The name and street address of the incorporator of these articles of incorporation is:

Name

Address

Dr. Sheryl O. Thompson

16760 Orange Boulevard  
Loxahatchee, FL 33470

The undersigned has executed these articles of incorporation

*Sheryl O. Thompson*  
Dr. Sheryl O. Thompson  
Incorporator

10.14.2002  
Date

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.

*Sheryl O. Thompson*  
Dr. Sheryl O. Thompson  
Registered Agent

10.14.2002  
Date

**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

UNDER THE PROVISIONS OF F.S. 607.0501, THE UNDERSIGNED CORPORATION,  
ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE  
FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED  
AGENT IN THE STATE OF FLORIDA.

1. The name of the corporation is: Sheryl O. Thompson, MD, P.A.
2. The name and address of the registered agent and office is:

Dr. Sheryl O. Thompson  
16760 Orange Boulevard  
Loxahatchee, Florida 33470

Having been named as registered agent and to accept service of process for the above-stated corporation at the place designated in this certificate, I 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.

*Sheryl O. Thompson*  
Dr. Sheryl O. Thompson

OCTOBER 14, 2002

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