

CAPITAL CONNECTION

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02/07 '03 13:41 NO.508 01/04

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Florida Department of State

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Fax Number : (850) 205-0381

From: Account Name : YOUR CAPITAL CONNECTION, INC.
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SECRETARY OF STATE
ALL AM/STATE FLORIDA

03 FEB -7 AM 8:29

FLORIDA PROFIT CORPORATION OR P.A.

PODIATRY HOME HEALTHCARE OF FLORIDA, INC

Certificate of Status	0
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ARTICLES OF INCORPORATION

OF

PODIATRY HOME HEALTHCARE OF FLORIDA, INC

03 FEB -7 AM 8:29
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I: NAME

The name of the corporation is **PODIATRY HOME HEALTHCARE OF FLORIDA, INC**

ARTICLE II: PRINCIPAL OFFICE

The principal place of business and mailing address of the corporation is 3800 N. 45 Avenue, Hollywood, FL 33021.

ARTICLE III: CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any one time is one hundred (100) shares having a par value of (\$1.00) per share.

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ARTICLE IV: INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is Carlos F. Bethart, 3800 N. 45 Avenue, Hollywood, FL 33021.

ARTICLE V: INCORPORATOR

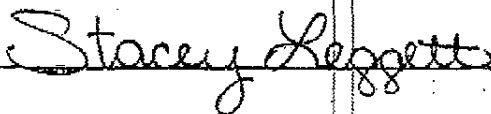
The name and address of the incorporator of these Articles of Incorporation is Capital Connection, Inc., 417 E. Virginia St., Suite 1, Tallahassee, FL 32301.

ARTICLE VI: INITIAL BOARD OF DIRECTORS

The name and address of each member of the initial Board of Directors of the corporation is President: Christopher W. Johnson, Vice-President/ Secretary/ Treasurer: Carlos F. Bethart, 3800 N. 45 Avenue, Hollywood, FL 33021.

The undersigned has executed these Articles of Incorporation this 7th day of February 2003.

"Capital Connection, Inc. by Stacey Legget, Client Representative"

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CAPITAL CONNECTION

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02/07 '03 13:42 NO.508 04/04

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CERTIFICATE OF DESIGNATION

REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section 607.0501, Florida Statutes, the mentioned 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: PODIATRY HOME HEALTH CARE OF FLORIDA, INC.

2. The name and street address of the registered agent and office is:

Carlos F. Bethart, 3800 N. 45 Avenue, Hollywood, FL 33021

HAVE BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS 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.



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