KILLGORE PEARLMAN

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Account Name : KILLGORE, PEARLMAN, STAMP, ORNSTBIN & SQUIRES

Account Number : I19980000007 Phone : (407)425-1020 Fax Number : (407)839-3635

FLORIDA PROFIT CORPORATION OR P.A.

RALPH J. TULLO, M.D., P.A.

Certificate of Status	0
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ARTICLES OF INCORPORATION OF RALPH J. TULLO, M.D., P.A.

ARTICLE I - NAME

The name of this corporation is RALPH J. TULLO, M.D., P.A. and its principal place of business and mailing address is 1396 Chessington Circle, Lake Mary, Florida 32746.

ARTICLE II - DURATION

This corporation shall have perpetual existence, commencing on the filing of these Articles.

ARTICLE III - PURPOSE

This corporation is organized for the purpose of transacting any and all lawful business pertaining to the practice of medicine.

ARTICLE IV - CAPITAL STOCK

This corporation is authorized to issue 100 shares of voting common stock having a par value of \$1.00 per share.

ARTICLE V - INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office of this corporation is 1396 Chessington Circle, Lake Mary, Florida 32746 and the name of the initial registered agent of this corporation at that address is Raigh J. Tullo, M.D.

ARTICLE VI - INCORPORATOR

The name and address of the incorporator is:

Ralph J. Tullo, M.D. 1396 Chessington Circle Lake Mary, Florida 32746 FILED

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SECRETARY OF STATE
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ARTICLE VII - INDEMNIFICATION

This corporation shall indemnify any officer or director, or any former officer or director, to the full extent permitted by law.

IN WITNESS WHEREOF, the undersigned has executed these Articles of Incorporation this day of April, 2003.

Ralph J. Julig M.D., Incorporator

ACCEPTANCE BY REGISTERED AGENT

The undersigned, being the person appointed in the foregoing Articles of Incorporation as the registered agent for RALPH J. TULLO, M.D., P.A. hereby accepts such appointment this ______ day of April, 2003, and states that he is familiar with, and accepts, the obligations provided for in Section 607.0505, Florida Statutes.

Raiph J. Apilo, M.D.

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SECRETARY OF STATE
TAILANDEED

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