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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

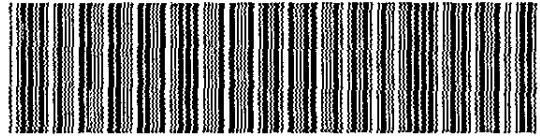
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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STATE
TALLAHASSEE, FLORIDA

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TRANSMITTAL LETTER

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

SUBJECT: Tampa Bay Area Cancer Consultants, PA
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

\$70.00 Filing Fee
 \$78.75 Filing Fee & Certificate of Status

\$78.75 Filing Fee & Certified Copy
 \$87.50 Filing Fee, Certified Copy & Certificate of Status

ADDITIONAL COPY REQUIRED

FROM: D. Anda Norbergs, MD
Name (Printed or typed)

3850 Tampa Road #2A
Address

Palm Harbor, FL 34684
City, State & Zip

727 789-2595
Daytime Telephone number

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:
Tampa Bay Area Cancer Consultants, PA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/ mailing address is:
3850 Tampa Road #2A
Palm Harbor, FL 34684

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
To engage in every aspect of the practice of medicine and all of its fields of specialization as are engaged in by medical physicians in this state.

ARTICLE IV SHARES

The number of shares of stock is:
1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):
D. Anda Norbergs, MD
President, Tampa Bay Area Cancer Consultants, PA
3850 Tampa Road #2A
Palm Harbor, FL 34684

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:
D. Anda Norbergs, MD
3850 Tampa Road #2A
Palm Harbor, FL 34684

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:
D. Anda Norbergs, MD
3850 Tampa Road #2A
Palm Harbor, FL 34684

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

D. Anda Norbergs, MD
Signature/Registered Agent

10-6-03
Date

D. Anda Norbergs, MD
Signature/Incorporator

10-6-03
Date