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To:
        Division of Corporations
        Fax Number      : (850)205-0381

From:
        Account Name    : A 1 A CORPORATE SERVICES, INC.
        Account Number  : I20010000247
        Phone           : (305)674-3313
        Fax Number      : (305)675-2811
```

FLORIDA PROFIT CORPORATION OR P.A.

Michael G Barile MD Inc.

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	$70.00

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ARTICLES OF INCORPORATION

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

ARTICLE I   NAME
The name of the corporation shall be :
Michael G Barile MD Inc.

ARTICLE II   PRINCIPAL OFFICE
The principal place of business/mailing address is :

4975 Bonita Beach Rd ph-5

Bonita Springs, Florida 34134

ARTICLE III   PURPOSE
The purpose for which the corporation is organized is to engage in any activity business permitted under the laws of the State of Florida.

ARTICLE IV   SHARES
The number of shares of stock is:
1,500 COMMON SHARES PAR VALUE $.10

ARTICLE V   REGISTERED AGENT

The name and Florida street address of the registered agent is:

Michael G Barile

4975 Bonita Beach Rd ph-5

Bonita Springs, Florida 34134

ARTICLE VII   INCORPORATOR

The name and Florida street address of the incorporator is:

Michael G Barile

4975 Bonita Beach Rd ph-5

Bonita Springs, Florida 34134

****

Having been named as registered agent to accept service of process for the above 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.

_____   _12-5-03_
Michael G Barile / Registered Agent   Date

X_____   _12-5-03_
Michael G Barile / Incorporator   Date

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