

Division of Corporations

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P04000007470

Florida Department of State
Division of Corporations
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To:

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

From:

Account Name : GERALD WEINBERG, P.C.
Account Number : I20030000043
Phone : (800)342-9856
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SECRETARY OF STATE
MAIL ADDRESS, FLORIDA

04 JAN -8 AM 8:30

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FLORIDA PROFIT CORPORATION OR P.A.

PHYSICIANS GROUP OF FT. PIERCE, INC.

Certificate of Status	0
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ARTICLES OF INCORPORATION
PHYSICIANS GROUP OF FT. PIERCE, INC.

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

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

ARTICLE I NAME

The name of the corporation is PHYSICIANS GROUP OF FT. PIERCE, INC.

ARTICLE II NATURE OF BUSINESS

This corporation may engage in or transact any or all lawful activities or business permitted under the laws of the United States, the State of Florida, or any other state, county, territory or nation.

ARTICLE III CAPITAL STOCK

The aggregate number of shares of stock and its par value that this corporation is authorized to have outstanding at any one time is: Two Hundred, (200), all of which shall be without par value.

ARTICLE IV TERMS OF EXISTENCE

This corporation is to exist perpetually.

ARTICLE V PRINCIPAL MAILING ADDRESS

The principal mailing address of the corporation shall be:

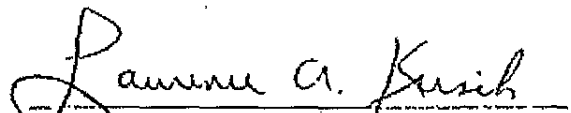
3451 West Midway Road
Ft. Pierce, Florida 34981

ARTICLE VI INCORPORATOR

The name and street address of the incorporator to this articles of incorporation is: _____

Lawrence A. Kirsch
90 State Street
Albany, New York 12207

IN WITNESS WHEREOF, the undersigned incorporator has executed these Articles of Incorporation this 8th day of January, 2004.


LAWRENCE A. KIRSCH

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

Pursuant to the provisions of Section 607.0501 or 617.0501, Florida
Statutes, the undersigned corporation, organized under the laws of the state
of Florida, submits the following statement in designating the registered
agent/registered agent, in the state of Florida.

1. The name of the Corporation is:

Physicians Group of Ft. Pierce, Inc.

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

MARTIN Zfay, MD.
(Name)

3401 W. MIDWAY RD.
(P.O. Box NOT acceptable)

FT. PIERCE, FL 34981
(City/State/Zip)

*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
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.*

Signature

Date

12/29/03

CA2724(200)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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