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TALLAHASSEE, FLORIDA

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

Subject: Bingham Anesthesia Services, Inc.
(Proposed Corporate Name – Must Include Suffix)

Enclosed are the original and 2 copies of the articles of incorporation and a check for:

- \$87.50 (Filing Fee, Certified Copy & Certificate of Status)

From: Timoteo Juan Chacon
478 E. Altamonte Drive, Suite 108, #205
Altamonte Springs, FL 32701
(412) 401-5085

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:
Bingham Anesthesia Services, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:
478 East Altamonte Drive, Suite 108, #205
Altamonte Springs, FL 32701

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
Medical and Advanced Nursing Services

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(w):
Timoteo Juan Chacon, President
478 East Altamonte Drive, Suite 108, #205
Altamonte Springs, FL 32701

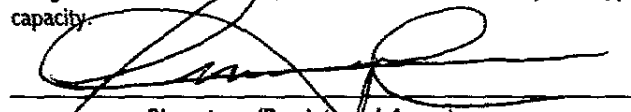
ARTICLE VI REGISTERED AGENT


The name and Florida street address of the registered agent is:
Timoteo Juan Chacon, President
478 East Altamonte Drive, Suite 108, #205
Altamonte Springs, FL 32701

ARTICLE VII INCORPORATOR

The name and address of the incorporator is:
Timoteo Juan Chacon, President
478 East Altamonte Drive, Suite 108, #205
Altamonte Springs, FL 32701

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 the capacity.



Signature/Registered Agent


Signature/Incorporator

3/15/04

Date
3/15/04

Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA