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To:

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

From:

Account Name : SAVAGE, KRIM, SIMONS & JONES, LLC
Account Number : 073617000267
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FLORIDA PROFIT CORPORATION OR P.A.

Image Plastic Surgery Center, P. A.

Certificate of Status	1
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ARTICLES OF INCORPORATION
FOR
IMAGE PLASTIC SURGERY CENTER, P.A.

The undersigned, for the purpose of forming a Professional Service Corporation under the Florida Professional Service Corporation and Limited Liability Company Act, Chapter 621, Florida Statutes, makes, acknowledges and files the following Articles of Incorporation.

ARTICLE I - NAME

The name of this corporation is Image Plastic Surgery Center, P.A..

ARTICLE II PURPOSE

The nature of the business to be transacted by this professional service corporation is to render professional medical services to the general public and do all things in connection therewith that are customarily done by licensed medical doctors under the laws of the State of Florida, and in accordance with the "Professional Service Corporation and Limited Liability Company Act of Florida", to invest its funds in real estate, mortgages, stocks, bonds, or other types of investments, and may own real or personal property necessary for the rendering of professional services. The business of the corporation shall be limited to the foregoing activities and such other activities as may hereafter be authorized for such corporations.

ARTICLE III - TERM OF EXISTENCE

This corporation shall exist perpetually commencing with the filing of these Articles of Incorporation.

ARTICLE IV - CAPITAL STOCK

The total number of shares of capital stock which the corporation shall be authorized to issue is One Hundred (100) shares. Such shares shall be of a single class of common stock and shall have a par value of One Dollar (\$1.00) each.

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ARTICLE V - INITIAL REGISTERED AGENT AND PRINCIPAL OFFICE

The name and street of address of the initial registered agent is Elizabeth H. Hodge, 408 W. University Avenue, Suite 500, Gainesville, Florida 32601. The principal office shall be 720 SW 2nd Avenue, Suite 305, Gainesville, Florida 32601. The Board of Directors may, from time to time, change the registered agent and move the principal office to any other address in Florida.

ARTICLE VI - DIRECTORS

The corporation shall have one (1) director initially. The number of directors may be increased from time to time by the Bylaws, but shall never be less than one (1). The name and address of the initial director of this corporation is Gloria Chin, M.D., 2842 SW 14th Drive, Gainesville, Florida 32608.

ARTICLE VII - INCORPORATOR

The name and address of the person signing these Articles of Incorporation is: Elizabeth F. Hodge, 408 W. University Avenue, Suite 500, Gainesville, Florida 32601-5289.

Article VIII - BYLAWS

The power to adopt, alter, amend or repeal Bylaws shall be vested with the Board of Directors and Stockholders.

ARTICLE IX - AMENDMENT


These Articles of Incorporation may be amended in the manner provided by the Bylaws.

ARTICLE X - LIMITATIONS ON CORPORATE STOCK

No one other than an individual who is a duly licensed as a medical doctor under the laws of the State of Florida may own any corporate stock of this corporation, nor may any Shareholder enter into a voting trust agreement or other type agreement vesting another person with the authority to exercise the voting power of any or all of his or her stock.

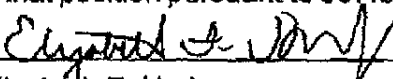
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IN WITNESS WHEREOF, the undersigned incorporator has executed these Articles of Incorporation, declaring and certifying that the facts herein stated are true, this 10th day of September, 2004.


Elizabeth F. Hodge
408 W. University Avenue, Suite 500
Gainesville, Florida 32601-5289

ACCEPTANCE OF REGISTERED AGENT

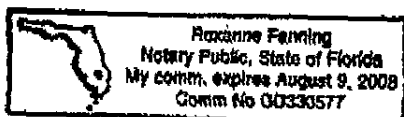
Having been named to accept service of process for Image Plastic Surgery Center, P.A., at the place designated in the Articles of Incorporation, the undersigned is familiar with and accepts the obligations of that position pursuant to 607.0501(3), Florida Statutes.

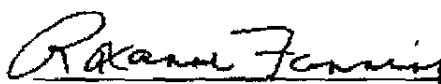

Elizabeth F. Hodge

STATE OF FLORIDA

COUNTY OF Marion

The foregoing instrument was acknowledged before me this 10th day of September, 2004 by Elizabeth F. Hodge ☒ who is personally known to me or ☐ who produced _____ as identification.




Notary Public, State of Florida
Print Name _____
Commission No. _____
Commission Expires: _____

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