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| (Re | equestor's Name) | |
|---|------------------------|-------------|
| (Address) | | |
| (Address) | | |
| (Cit | y/State/Zip/Phone | <i>:#</i>) |
| PICK-UP | WAIT | MAIL |
| (Bu | isiness Entity Nam | ne) |
| (Document Number) | | |
| Certified Copies | Certificates of Status | |
| Special Instructions to Filing Officer: | | |
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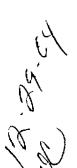
Office Use Only



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December 29, 2004

Department of State, Florida 409 East Gaines Street Tallahassee FL 32399

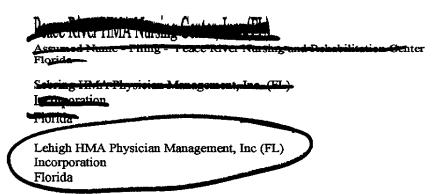
Re: Order #: 6270310 SO

Customer Reference 1:

Customer Reference 2:

Dear Department of State, Florida:

Please obtain the following:



Enclosed please find a check for the requisite fees. Please return document(s) to the attention of the undersigned.

If for any reason the enclosed cannot be processed upon receipt, please contact the undersigned immediately at (850) 222-1092. Thank you very much for your help.

Jose much

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:

Lehigh HMA Physician Management, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 5811 Pelican Bay Boulevard, Suite 500 Naples, FL 34108

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To engage in any and all lawful business for which corporations may be incorporated.

ARTICLE IV SHARES

The number of shares of stock is: 10,000

ARTICLE_V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

Timothy R. Parry, Senior V.P., Secretary and Director, 5811 Pelican Bay Boulevard, Suite 500, Naples, FL 34108 James A. Barber, President, CEO and Director, 5811 Pelican Bay Boulevard, Suite 500, Naples, FL 34108 J. Randall Moglia, Treasurer, 5811 Pelican Bay Boulevard, Suite 500, Naples, FL 34108 Joshua S. Putter, Vice President and Director, 809 East Marion Avenue, Punta Gorda, FL 33950

ARTICLE VI REGISTERED AGENT

The <u>name and Florida street address</u> (P.O. Box NOT acceptable) of the registered agent is:

C T Corporation System, 1200 South Pine Island Road, Plantation, Florida 33324

ARTICLE VII INCORPORATOR

5811 Pelican Bay Boulevard, Suite 500 Naples, FL 34108

Timothy R. Parry

The <u>name and address</u> of the Incorporator is:

Select Paris 12-16-04
gnature/Incorporator Date