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

From: Account Name : YOUR CAPITAL CONNECTION, INC.
Account Number : I20000000257
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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FLORIDA PROFIT CORPORATION OR P.A.

SUSAN STRICKLAND, DO, P.A.

Certificate of Status	0
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ARTICLES OF INCORPORATIONSECRETARY OF STATE
TALLAHASSEE, FLORIDA

THE UNDERSIGNED, acting as Incorporator of a corporation under the Florida General Corporation Act hereby associate themselves together to form a corporation for profit and adopt the following Articles of Incorporation for such corporation.

ARTICLE I: Name

The name of this corporation is: SUSAN STRICKLAND, DO, P.A.

ARTICLE II: PRINCIPAL OFFICE

The principal place of business/mailling address is: 5847 Sunnyside Lane, Fort Myers, FL 33919.

ARTICLE III: Purpose

The general nature and purposes of business to be transacted, promoted and carried on by the corporation are as follows:

- a. To engage in every aspect in the practice of medicine, and all its fields of specializations, as are engaged in by medical doctors.
- b. To engage and render professional services involved only through its officers, agents and employees who shall be in good standing and duly licensed or otherwise legally authorized within the State of Florida to render the same professional service as this corporation.
- c. To open up a medical office for the treatment of patients and obtain hospital privileges for the treatment of patients.
- d. To do everything necessary and proper in accomplishing the purposes herein set forth and to do anything incidental thereto which is not forbidden under the laws of the State of Florida.

ARTICLE IV: Capital Stock

The amount of the total authorized stock of the corporation shall be 1000 shares common stock having a par value of \$1.00 per share fully paid and non-assessable. Stock may be issued by cash, property, labor, services or good will, as may be

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determined by the Board of Directors. There will only be one class of stock, common stock, issued with full voting powers. No other class of stock will be issued. There will be no preemptive rights for any stockholder.

ARTICLE V: Initial Registered Office and Agent

The name and address of the initial registered agent and office of this corporation is as follows:

Susan Strickland, DO
5847 Sunnyside
Fort Myers, FL 33919

ARTICLE VI: Initial Board of Directors

The corporation shall have one director initially. The number of directors may be either decreased or increased from time to time by an amendment of the By-Laws of the corporation in the manner provided by law, but shall never be less than one.

The names and addresses of the initial director(s) of this corporation is:

Name	Address
Susan Strickland, DO	5847 Sunnyside Lane Ft. Myers, FL 33919

ARTICLE VII: Initial Officers

The names and addresses of the initial officers of this corporation are:

Name	Address	Title-Office
Susan Strickland, DO	5847 Sunnyside Lane Ft. Myers, FL 33919	President Secretary/Treasurer

ARTICLE VIII: Incorporators

The name and address of the Incorporator signing these Articles of Incorporation is:

Name	Address
Susan Strickland, DO	5847 Sunnyside Lane Ft. Myers, FL 33919

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ARTICLE IX: Indemnification

The corporation may be empowered to indemnify any officer or director or any former officer or director in the manner set out and pursuant to the provisions of Section 607.14 of the Florida Statutes, as amended.

ARTICLE X: Amendment of Articles

These Articles of Incorporation may be amended in the manner provided by law. Every amendment shall be approved by the Board of Directors, proposed by them to the stockholders and approved at a stockholders' meeting by a majority of the stockholders.

IN WITNESS WHEREOF, the undersigned Incorporators have executed these Articles of Incorporation this 12th day of August, 2005.

Susan Strickland DO
Susan Strickland, DO

STATE OF FLORIDA)
)
COUNTY OF LEE)

BEFORE ME, the undersigned authority, personally appeared Susan Strickland, DO, to me known to be the person who executed the foregoing Articles of Incorporation and he acknowledged to and before me that he executed such instrument.

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 12th day of August, 2005.

Antoinette S. Gayer
Notary Public

My Commission Expires: 11-8-2008



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**CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE
FOR SERVICE OF PROCESS WITHIN FLORIDA,
NAMING AGENT UPON WHOM PROCESS MAY BE SERVED**

In compliance with Section 48.091, Florida Statutes, the following is submitted:

FIRST: That SUSAN STRICKLAND, DO, P.A. desiring to organize or qualify under the laws of the State of Florida with its principal place of business at 5847 Sunnyside Lane, County of Lee, State of Florida, has named Susan Strickland, DO, 5847 Sunnyside Lane, Ft. Myers, State of Florida, as its agent to accept service of process within Florida.

Susan Strickland DO
Susan Strickland, DO, President
8/12/05
Date

Having been named to accept service of process for the above stated corporation, at the place designated in this Certificate, I hereby agree to act in this capacity, and I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties.

Susan Strickland DO
Susan Strickland, DO, Registered Agent
8/12/05
Date

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