

**Electronic Articles of Incorporation  
For**

P05000118668  
FILED  
August 25, 2005  
Sec. Of State  
jshivers

HEALTH PROVIDERS OF NORTH FLORIDA, INC.

The undersigned incorporator, for the purpose of forming a Florida profit corporation, hereby adopts the following Articles of Incorporation:

**Article I**

The name of the corporation is:

HEALTH PROVIDERS OF NORTH FLORIDA, INC.

**Article II**

The principal place of business address:

1594 MEGAN BAY CIRCLE, HOLLY HILL  
DAYTONA, FL. US 32117

The mailing address of the corporation is:

1594 MEGAN BAY CIRCLE, HOLLY HILL  
DAYTONA, FL. US 32117

**Article III**

The purpose for which this corporation is organized is:

ANY AND ALL LAWFUL BUSINESS.

**Article IV**

The number of shares the corporation is authorized to issue is:

1500 SHARES AT \$0.00 PAR VALUE PER SHARE

**Article V**

The name and Florida street address of the registered agent is:

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL. 32301

I certify that I am familiar with and accept the responsibilities of registered agent.

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Registered Agent Signature: LAURA R. DUNLAP

### **Article VI**

The name and address of the incorporator is:

THE COMPANY CORPORATION  
2711 CENTERVILLE ROAD  
SUITE 400  
WILMINGTON, DE 19808

Incorporator Signature: LAURA R. DUNLAP

### **Article VII**

The initial officer(s) and/or director(s) of the corporation is/are:

Title: D  
MONICA WITHERSPOON  
1594 MEGAN BAY CIRCLE  
DAYTONA, FL. 32117 US