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Fax Number : (850) 205-0381

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Account Name : YOUR CAPITAL CONNECTION, INC.  
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FLORIDA PROFIT/NON PROFIT CORPORATION

MICHAEL A. STEPHENS, M.D., P.A.

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CAPITAL CONNECTION

NO. 4215 P. 3

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**ARTICLES OF INCORPORATION  
OF**

**MICHAEL A. STEPHENS, M.D., P.A.**

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The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

**ARTICLE I: NAME**

The name of the corporation is **MICHAEL A. STEPHENS, M.D., P.A.**

The specific nature of business of this professional association is the practice of medicine and provision of related medical services.

**ARTICLE II: PRINCIPAL OFFICE**

The principal place of business is and mailing address of the corporation is **440 Kingsley Avenue, Orange Park, FL 32073.**

**ARTICLE III: CAPITAL STOCK**

The number of shares of stock that this corporation is authorized to have outstanding at any one time is one hundred thousand (100,000) shares having no par value.

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**ARTICLE IV: INITIAL REGISTERED AGENT AND ADDRESS**

The name and address of the initial registered agent is **FloridAgent.com, Inc., 1543 Kingsley Avenue, Bldg. 5, Orange Park, FL 32073.**

**ARTICLE V: INCORPORATOR**

The name and address of the incorporator of these Articles of Incorporation is **Your Capital Connection, Inc., 417 E. Virginia St., Suite 1, Tallahassee, FL 32301.**

**ARTICLE VI: OFFICERS AND DIRECTORS**

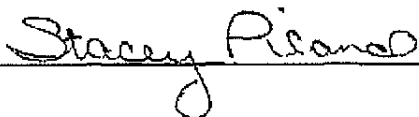
The name and address of the initial Board of directors is **President/ Secretary/ Director: Michael A. Stephens, 440 Kingsley Avenue, Orange Park, FL 32073.**

**Officers, Directors and Shareholders are restricted to physicians who are actively licensed to practice medicine in the State of Florida.**

**ARTICLE VII: INDEMNIFICATION**

The Corporation shall indemnify and may insure its officers and directors to the fullest extent permitted by law currently in effect or hereinafter enacted.

The undersigned has executed these Articles of Incorporation this 1<sup>st</sup> day of February 2006. Your Capital Connection, Inc., by Stacey Piland, Client Representative

  
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**CERTIFICATE OF DESIGNATION**

**REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of section 607.0501, Florida Statutes, the mentioned professional association, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. The name of the professional association is:

MICHAEL A. STEPHENS, M.D., P.A.

2. The name and street address of the registered agent and office is:

FlordAgent.com, Inc.  
1543 Kingsley Avenue, Bldg. 5  
Orange Park, FL 32073

THE UNDERSIGNED HAS BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, AND THE UNDERSIGNED HEREBY ACCEPTS THE APPOINTMENT AS REGISTERED AGENT AND AGREES TO ACT IN THIS CAPACITY. THE UNDERSIGNED FURTHER AGREES TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF ITS DUTIES AS REGISTERED AGENT, AND THE UNDERSIGNED FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF THE UNDERSIGNED'S POSITION AS REGISTERED AGENT.

FlordAgent.com, Inc.

By: 

Grady H. Williams, Jr.  
Vice President

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