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B. McKnight FEB 2 0 2006

660 East Jefferson Street
Tallahassee, FL 32301
Fax 850 222 7615

February 17, 2006

Department of State, Florida Clifton Building 2611 Executive Center Circle Tallahassee FL 32301

Re: Order #: 6572839 SO Customer Reference 1: Customer Reference 2:

Dear Department of State, Florida:

Please file the attached:

Naples HMA, Inc. (FL) Incorporation Florida

Naples HMA, Inc. (FL) Certificate of Status/Authorization-Domestic Florida

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

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

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:

Naples HMA, 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 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, Director, Senior Vice President & Secretary, 5811 Pelican Bay Blvd., Suite 500, Naples, FL 34108 Robert F. Jay, Treasurer, 5811 Pelican Bay Blvd., Suite 500, Naples, FL 34108 Joshua S. Putter, Director, Vice President, 809 E. Marion Street, 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

The name and address of the Incorporator is:

Timothy R. Parry, 5811 Pelican Bay Boulevard, Suite 500, Naples, FL 34108

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiax with and accept the appointment as registered agent and agree to act in this capacity 7/16/06 Date 2-15-06 PETER F. SOUZA ASSISTANT SECRETARY

Timothy R. Parry

FL001 - 9/14/05 C T System Online