

PO6000024799

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

(Business Entity Name)

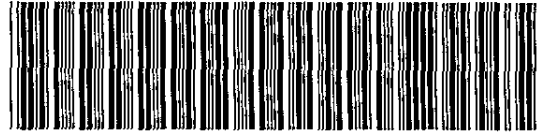
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Certified Copies _____

Certificates of Status _____

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06 FEB 17 PM 12:02

SECRETARY OF STATE
DIVISION OF CORPORATIONS

06 FEB 17 PM 3:36
DIVISION OF CORPORATIONS

McKnight FEB 20 2006

CT CORPORATION SYSTEM

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:

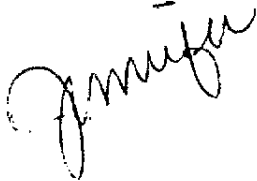
Please file the attached:

Collier HMA Physician Management Inc. (FL)
Incorporation
Florida

Collier HMA Physician Management 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.



660 East Jefferson Street
Tallahassee, FL 32301
Tel. 850 222 1092
Fax 850 222 7615

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:

Collier HMA Physician Management, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling 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
James A. Barber, Director, President & CEO, 5811 Pelican Bay Blvd., Suite 500, Naples, FL 34108

ARTICLE VI REGISTERED AGENT

The name and Florida street address (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 familiar with and accept the appointment as registered agent and agree to act in this capacity

PETER F. SOUZA
ASSISTANT SECRETARY

Signature/Registered Agent

Date

Signature/Incorporator

Date

Timothy R. Parry

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
06 FEB 17 PM 12:02