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Division of Corporations

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Florida Department of State  
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**FLORIDA PROFIT/NON PROFIT CORPORATION**

**Coordinated Wound Care, Inc.**

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**ARTICLES OF INCORPORATION  
OF  
COORDINATED WOUND CARE, INC.**

**ARTICLE I - NAME**

The name of the corporation is Coordinated Wound Care, Inc. (the "Corporation").

**ARTICLE II - ADDRESS**

The address of the principal office and mailing address of the Corporation is 5150-2 Timiquana Road, Jacksonville, Florida 32210.

**ARTICLE III - CAPITAL STOCK**

This Corporation is authorized to issue 1,000 shares of common stock, all of which shall be of the par value of \$1.00 per share.

**ARTICLE IV - INITIAL REGISTERED OFFICE AND AGENT**

The street address of the initial registered office of this Corporation is 5150-2 Timiquana Road, Jacksonville, Florida 32210 and the name of its initial registered agent at such address is Thomas McEnany.

**ARTICLE V - INITIAL BOARD OF DIRECTORS**

The number of Directors constituting the initial Board of Directors of this Corporation shall be three and the names and addresses of such persons who are to serve as members thereof are:

NAME	ADDRESS
Kevin Mathews	5150-2 Timiquana Road Jacksonville, Florida 32210
Thomas McEnany	5150-2 Timiquana Road Jacksonville, Florida 32210
Mohammad Masoud Nemti	2247 Salt Myrtle Lane Orange Park, Florida 32003

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**ARTICLE VI - INCORPORATOR**

The name and address of the Incorporator are Karen K. McEnany, 5150-2 Timiquana Road, Jacksonville, Florida 32210.

**ARTICLE VII - AMENDMENT**

This Corporation reserves the right to amend, alter, change or repeal any provision contained in its articles of incorporation, in the manner now or hereafter prescribed by statute, and all rights conferred upon shareholders herein are granted subject to this reservation.

IN WITNESS WHEREOF, the undersigned Incorporator has executed these Articles of Incorporation this 13 day of ~~March~~ April, 2006.

  
\_\_\_\_\_  
Karen K. McEnany - Incorporator

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**CERTIFICATE OF DESIGNATION  
REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of section 607.0501, Florida Statutes, the below named Corporation, 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 Corporation is Coordinated Wound Care, Inc.
2. The name and address of the registered agent and office are Thomas McEnany, 5150-2 Timiquana Road, Jacksonville, Florida 32210.

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

  
Thomas McEnany - Registered Agent

Date: March 20, 2006