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## To:

Division of Corporations  
Fax Number : (850)205-0381

## From:

Account Name : FAS-T CORP. AGENTS, INC.  
Account Number : 071001002335  
Phone : (305)599-0839  
Fax Number : (305)716-0346

SECRET  
TALLAHASSEE, FLORIDA

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## FLORIDA PROFIT/NON PROFIT CORPORATION

DLG ANESTHESIA, INC.

Certificate of Status	0
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Estimated Charge	\$78.75

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J. Shivers APR 20 2006

**ARTICLES OF INCORPORATION**

**OF**

**DLG ANESTHESIA, INC.**

**The undersigned incorporator(s), for the purposes of forming a corporation under the Florida General Corporation Act, hereby adopt(s) the following Articles of Incorporation.**

**ARTICLE 1- NAME**

The name of the corporation shall be:

**DLG ANESTHESIA, INC.**

The principal place of business of this corporation shall be:

**4900 MONROE STREET  
HOLLYWOOD, FL 33021**

**ARTICLE 11- NATURE OF BUSINESS**

This Corporation may engage in or transact any or all lawful activities or business permitted under the laws of the United States, the State of Florida, or any other state, country, territory or nation.

**ARTICLE 111- CAPITAL STOCK**

The aggregate number of shares of stock and its value that this corporation is authorized to have outstanding at any one time is 1000 shares with a \$1.00 par value.

**ARTICLE 1V- TERM OF EXISTENCE**

This Corporation is to exist perpetual.

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**ARTICLE V- OFFICERS/DIRECTORS**

The name(s) and street address(es) of the initial officer(s) and director(s), if any, who shall hold office the first year of the corporation's existence or until their successor(s) is (are) elected is (are):

**DANELLE GALT-McBEAN  
PRESIDENT  
4900 MONROE STREET  
HOLLYWOOD, FL. 33021**


**ARTICLE V1- INCORPORATOR(S)**

The name(s) and street address(es) of the incorporator(s) to this articles of incorporation is (are):

**DANELLE GALT-McBEAN  
4900 MONROE STREET  
HOLLYWOOD, FL. 33021**

IN WITNESS WHEREOF, the undersigned incorporators have executed these Articles of Incorporation this 14<sup>th</sup> APRIL, 2006.

Signature(s) of Incorporator(s)

  
\_\_\_\_\_  
\_\_\_\_\_

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

Pursuant to the provisions of Section 607.325, Florida Statutes, the undersigned 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:

**DLG ANESTHESIA, INC.**

2. The Name and Address of the registered agent and office is:

**DANELLE GALT-McBEAN  
4900 MONROE STREET  
HOLLYWOOD, FL 33021**

Signature: 

Title: PRESIDENT

Date: 04-14-06

Having been named to accept service of process for the above stated corporation, at the place designated in this certificate, I hereby agree to act in this capacity and I further agree to comply with the provisions of all statutes relative to the proper and complete performances of my duties, and I accept the duties and obligations of section 607.325 Florida Statutes.

Signature: 

Date: 04-14-06

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