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

From:
Account Name : YOUR CAPITAL CONNECTION, INC.
Account Number : I20000000257
Phone : (850)224-8870
Fax Number : (850)224-7047

FLORIDA PROFIT/NON PROFIT CORPORATION

PUTNAM MEDICAL CENTER, INC.

Certificate of Status	0
Certified Copy	1
Page Count	01
Estimated Charge	$78.75

D. WHITE JUN -8 2006

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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:

Putnam Medical Center, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

P.O. Box 838
Palatka, FL 32178

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Professional Services

ARTICLE IV SHARES

The number of shares of stock is:

1,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

Brent D. Brandon
PO Box 838
Palatka, FL 32178

Blake K Brandon
PO Box 838
Palatka, FL 32178

ARTICLE VI REGISTERED AGENT

The **name and Florida street address** (P.O. Box **NOT** acceptable) of the registered agent is:

Blake K. Brandon
159 E. River Road
East Palatka, FL. 32131

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Blake K. Brandon
P.O. Box 838
Palatka, FL 32178

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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

Signature/Registered Agent — Date: 6-7-6

Signature/Incorporator — Date: 6-7-6

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