Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name

: CORPDIRECT AGENTS, INC.

Account Number : 110450000714 Phone

: (850)222-1173

Fax Number

: (850)224-1640

101756.82406

FLORIDA PROFIT/NON PROFIT CORPORATION

BROWARD ANESTHESIA CONCEPTS, INC.

Certificate of Status	0
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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:

Broward Anesthesia Concepts, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 1309 SW 8th Ave, Ft Lauderdale FL 33315

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Healthcare staffing; Any and all lawful business activity

ARTICLE IV SHARES

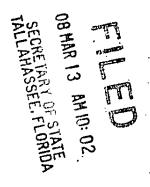
The number of shares of stock is:

100 at \$.01 par value

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Kevin Pittman President, Treasurer, Secretary 1309 SW 8th Ave, Ft Lauderdale FL 33315



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ARTICLE VI	REGISTERED AGENT		
The name and Flori	da street address (P.O. Box NOT ac	ceptable) of the registered agent is:	
CorpDirect Agents	s, Inc.	7	
515 East Park Ave	enue	``	
Tallahassee, FL 3	2301		五四一
ARTICLE VII	INCORPORATOR		35.2 3 TT
The name and addr	ess of the Incorporator is:		Fig 12 mg
Kevin Pittman	_ , ,		400 0
1309 SW 8th Ave,	Ft Lauderdale FL 33315		6 0 O
*********	**********	**********	*****
	registered agent to accept service of process		ace designated in this
certificate, I am familiar	with and accept the appointment as register	ed agent and agree to act in this capacity	
	1 1 10		,
_ lalick	1 + 55 · bc.	3.13.07)
Signature	Registered Agent	Date	;