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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

10 MAR 25 PM 3:03

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AND  
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LAW OFFICES

**DONAHOO, BALL & McMENAMY, P.A.**

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THOMAS M. DONAHOO\*

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WILLIAM B. McMENAMY\*

THOMAS M. DONAHOO, JR.

EMILY K. DILLOW

JOHN W. DONAHOO

(1907-1993)

March 24, 2010

**VIA FEDERAL EXPRESS**

Department of State  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**Re: Todd L. Murphy, M.D., P.A.  
Our File Reference: 10561.001**

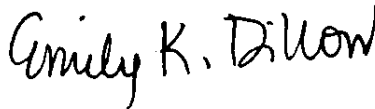
Dear Madam or Sir:

I am sending the following for your further handling with regard to the above referenced P.A.

1. Articles of Incorporation of Todd L. Murphy, M.D., P.A.
2. Check in the amount \$78.75 for filing fee, designation of registered agent and certified copy

Please return the certified copy to our office at the above address. Thank you for your assistance with this matter and if you should have any questions, please feel free to give me a call.

Sincerely,



Emily K. Dillow

EKD/tbw

Enclosures

cc: Todd L. Murphy, M.D. VIA email

**ARTICLES OF INCORPORATION**  
**OF**  
**TODD L. MURPHY, M.D., P.A.**

APPROVED  
AND  
FILED

10 MAR 25 PM 3: 03

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

The undersigned incorporator to these Articles of Incorporation hereby executes these Articles of Incorporation for the purpose of forming a corporation under the laws of the State of Florida.

**ARTICLE I - NAME AND ADDRESS**

The name of the corporation and the street address of the initial principal office are TODD L. MURPHY, M.D., P.A., c/o Baptist Medical Center Nassau, 1250 South 18<sup>th</sup> Street, Fernandina Beach, Florida 32034. The mailing address of the corporation shall be the same as the street address.

**ARTICLE II - DURATION**

This corporation is to exist perpetually.

**ARTICLE III - PURPOSE**

To engage in every phase and aspect of the business of rendering the same professional services to the public that a doctor of medicine, duly licensed under the laws of the state of Florida, is authorized to render, and which has as its shareholders only other professional corporations, professional limited liability companies, or individuals who themselves are duly licensed or otherwise legally authorized to render the same professional services as the corporation.

To transact any and all lawful business for which professional service corporations may be incorporated under the Florida Business Corporation Act, Chapter 607, and the Professional Service Corporation and Limited Liability Act, Chapter 621, Florida Statutes, 2006, as amended.

**ARTICLE IV - CAPITAL STOCK**

This corporation is authorized to issue 100 shares of \$1.00 par value voting stock which shall be designated common shares.

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

The street address of the initial registered agent of this corporation is 50 North Laura Street, Suite 2925, Jacksonville, Florida 32202, and the name of the initial registered agent is Emily K. Dillow.

I hereby state that I am familiar with the obligations of, and accept appointment as registered agent on behalf of TODD L. MURPHY, M.D., P.A.

  
\_\_\_\_\_  
EMILY K. DILLOW

**ARTICLE VI - INITIAL BOARD OF DIRECTORS**

This corporation shall have one (1) director initially. The names and addresses of the directors of this corporation are:

<u>NAME</u>	<u>ADDRESS</u>
Todd L. Murphy, M.D.	Baptist Medical Center Nassau 1250 South 18 <sup>th</sup> Street, Fernandina Beach, Florida 32034

**ARTICLE VII - INCORPORATOR**

The name and post office address of the person signing these Articles is:

<u>NAME</u>	<u>ADDRESS</u>
Emily K. Dillow	50 N. Laura Street, Suite 2 Jacksonville, FL 32202

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

APPROVED  
AND  
FILED

IN WITNESS WHEREOF, I, the undersigned subscribing incorporator, have hereunto set my hand and seal this 24<sup>th</sup> day of March, 2010, for the purpose of forming this corporation under the laws of the State of Florida, and I hereby make and file in the office of the Secretary of the State of Florida, these Articles of Incorporation and certify that the facts herein stated are true.

Emily K. Dillow  
EMILY K. DILLOW

STATE OF FLORIDA  
COUNTY OF DUVAL

SUBSCRIBED, SWORN AND ACKNOWLEDGED to before me by Emily K. Dillow, who is (X) personally known to me or ( ) has produced \_\_\_\_\_ as identification, this 24<sup>th</sup> day of March, 2010.

Teresa B. West  
Notary Public, State of Florida at Large  
(Teresa B. West)  
Print name below signature  
My Commission Expires: \_\_\_\_\_  
My Commission Number: \_\_\_\_\_

