

P95000029212

CAPITAL CONNECTION, INC.

417 E. Virginia St., Suite 1, Tallahassee, FL 32301, (904)224-8870

Mailing Address: Post Office Box 10349, Tallahassee, FL 32302

TOLL FREE No. 1-800-342-8062

FAX (904) 222-1222

NAME _____

FIRM _____

ADDRESS _____

PHONE () _____

Service: Top Priority _____ Regular _____
One Day Service _____ Two Day Service _____

To us via _____ Return via _____

Mailor No.: _____ Express Mail No. _____

State Fee \$ _____ Our \$ _____

PAID
95 FEB 13 PM 2:34
TALLAHASSEE, FL 32301

4/13/95

RE: Surgical Information
Associates, Inc.

C.C. FEE. DISBURSED

☒ Capital Express™
☒ Art. of Inc. File
☐ Corp. Record Search
☐ Ltd. Partnership File
☐ Foreign Corp. File
☒ () Cert. Copy(s)

☐ Art. of Amend. File
☐ Dissolution/Withdrawal
☐ C U S-
☐ Fictitious Name File

☐ Name Reservation
☐ Annual Report/Reinstatement
☐ Reg. Agent Service
☐ Document Filing

☐ Corporate Kit
☐ Vehicle Search
☐ Driving Record
☐ Document Retrieval

000001455590
-04/13/95-01012-012

***122.50 ***122.50

☐ UCC 1 or 3 File
☐ UCC 11 Search
☐ UCC 11 Retrieval
☐ File No.'s, _____ Copies
☐ Courier Service
☐ Shipping/Handling
☐ Phone ()
☐ Top Priority
☐ Express Mail Prop.
☐ FAX () pgs.

SUBTOTALS

REQUEST TAKEN CONFIRMED APPROVED

DATE _____

TIME _____ CK No. _____

BY PAK

WALK-IN Will Pick Up 713 1200

FEE.....	\$
DISBURSED.....	\$
SURCHARGE.....	\$
TAX on corporate supplies.....	\$
SUBTOTAL.....	\$
PREPAID.....	\$
BALANCE DUE.....	\$
	\$

Please remit invoice number with payment
TERMS: NET 10 DAYS FROM INVOICE DATE
1 1/2% per month on Past Due Amounts
Past 30 Days, 18% per Annum

THANK YOU
from
Your Capital Connection

FILED

95 APR 13 PM 3:26

CLERK OF DISTRICT COURT

ARTICLES OF INCORPORATION

OF

SURGICAL INFORMATION ASSOCIATES, INC.

ARTICLE I.

The name of this corporation shall be:

SURGICAL INFORMATION ASSOCIATES, INC.

ARTICLE II.

The general nature of business to be carried on by this corporation,
is:

- a. To enter into any and all contracts with any person, firm, corporation and/or association.
- b. To engage in the transaction of any and all lawful business or businesses for which corporations may be incorporated under the General Corporation Act of the State of Florida.

ARTICLE III.

The maximum number of shares of stock that this corporation is authorized to issue is ONE THOUSAND (1,000) shares of common stock of NO PAR VALUE each, the consideration to be paid for each to be determined from time to time by the Board of Directors.

ARTICLE IV.

The shareholders of this corporation shall have preemptive right to

acquire unissued or treasury shares of the corporation, or securities of the corporation convertible into or carrying a right to subscribe to or acquire shares.

ARTICLE V.

This corporation is to have perpetual existence.

ARTICLE VI.

The principal office of this corporation shall be located at 2706 N. Greenway Drive, Coral Gables, Florida, with the corporation retaining the power of moving its office to any other address in the State of Florida, as may, from time to time, and at any time, be determined by its Board of Directors, with branch offices in such other cities, counties, states and countries as may from time to time, and at any time, be determined by its Board of Directors.

ARTICLE VII.

The initial registered office of this corporation shall be at 2706 N. Greenway Drive, Coral Gables, Florida 33134. The initial Registered Agent at such address shall be CARLOS LAVERNIA.

ARTICLE VIII.

This corporation shall at all times have at least ONE (1) Director who shall conduct the business of the corporation as a Board of Directors. The stockholders of the corporation may, from time to

time, and at any time, increase or decrease the size of the Board of Directors of the corporation, provided the corporation has at least ONE (1) Director.

ARTICLE IX.

The name and address of the member of the initial Board of Directors of the corporation, who shall hold office until the first annual meeting of shareholders, and until his successor is elected and qualified, or until his earlier removal from office, resignation or death, is:

CARLOS LAVERNIA
2706 N. Greenway Drive
Coral Gables, Florida 33134

ARTICLE X.

The name and address of the incorporator is:

CARLOS LAVERNIA
2706 N. Greenway Drive
Coral Gables, Florida 33134

ARTICLE XI.

The By-Laws of this corporation may be created, amended, changed or replaced by either the stockholders or the Directors of the corporation at any duly scheduled regular or special meeting called for that purpose.

ARTICLE XII.

This corporation shall indemnify any officer or Director, or any

former officer or Director, or any person who serves, at the request of the corporation, as an officer or director of another corporation, to the full extent permitted by law.

I the undersigned, do hereby subscribe, acknowledge and file these Articles of Incorporation, hereby certifying that the facts contained herein are true and correct, and accordingly hereto set my hand and seal this 12th day of April, 1995.

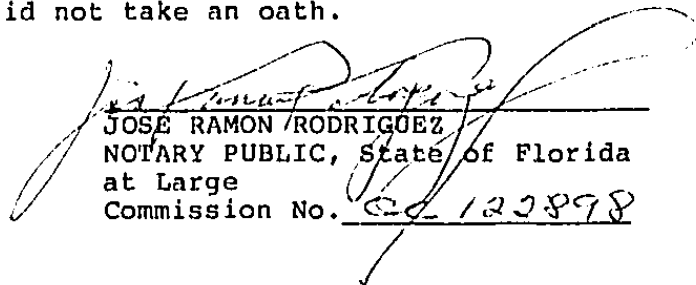
 (SEAL)
CARLOS LAVERNIA

STATE OF FLORIDA)
) SS.
COUNTY OF DADE)

The foregoing instrument was acknowledged before me this 12th day of April, 1995, by CARLOS LAVERNIA, who is personally known to me or who has produced Florida Driver License as identification, and who did not take an oath.

MY COMMISSION EXPIRES:

NOTARY PUBLIC STATE OF FLORIDA
MY COMMISSION EXP. JULY 5, 1995
BONDED THRU GENERAL INS. UND.


JOSE RAMON RODRIGUEZ
NOTARY PUBLIC, State of Florida
at Large
Commission No. 22-123898

FILED

CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE, FOR THE SERVICE OF PROCESS WITHIN THIS STATE, NAMING AGENT UPON WHOM PROCESS MAY BE SERVED.

In pursuance of Chapter 48.091, Florida Statutes, the following is submitted, in compliance with said Act:

First--That SURGICAL INFORMATION ASSOCIATES, INC.,
desiring to organize under the laws of the State of FLORIDA
with its principal office, as indicated in the articles of incorporation at City of Coral Gables, _____ County
of DADE, State of FLORIDA
has named CARLOS LAVERNIA
located at 2706 N. Greenway Drive
(Street address and number of building, Post Office Box
address not acceptable)
City of Coral Gables, County of DADE,
State of Florida, as its agent to accept service of process within
this state.

ACKNOWLEDGEMENT: (MUST BE SIGNED BY DESIGNATED AGENT)

Having been named to accept service of process for the above stated corporation, at place designated in this certificate, I hereby accept to act in this capacity, and agree to comply with the provision of said Act relative to keeping open said office.

By _____

CARLOS LAVERNIA
(Registered Agent)