

Telephone:
Orlando (407) 841-3044
Brevard County (407) 633-4777
Telefax (407) 841-2914

KELAHER
ATTORNEYS AT LAW
WIELAND
A Professional Association

Barnett Bank Center
190 N. Orange Ave., Suite 1500
Orlando, Florida 32801

Please Reply To
Post Office Box 944
Orlando, Florida 32802

JAMES P. KELAHER

P95000053865

Secretary of State
Corporate Records
Post Office Box 6327
Tallahassee, FL 32314

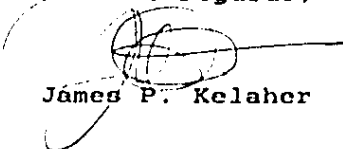
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Dear Sir or Madam:

Enclosed please find three copies of the Articles of Incorporation, one original and two photocopies. The name of the corporation is to be FLORIDA GASTROENTEROLOGY CONSULTANTS, P.A.

Additionally, please find a check enclose in the amount of \$122.50, to cover the cost for this service.

Kindest regards,


James P. Kelaher

JPK/lr
enc.

RECEIVED
CORPORATE RECORDS
JUL 13 1995
10:11 AM '95

SHARON L. TALA JUL 13 1995

ARTICLES OF INCORPORATION

FLORIDA GASTROENTEROLOGY CONSULTANTS, P.A.

ARTICLE I

The name of the professional association is:

FLORIDA GASTROENTEROLOGY CONSULTANTS, P.A.

ARTICLE II

The duration of the professional association is perpetual.

ARTICLE III

The general purposes for which the professional association is organized are:

1. To engage in the business of providing the care and treatment of gastroenterology to any person in need of such care.
2. To transact any other lawful business for which professional association may be incorporated under the Florida General Corporation Act or engage in any other trade, business or investments which can, in the opinion of the board of directors of the professional association, be advantageously carried on in connection with or auxiliary to the foregoing business.
3. To do such other things as are incidental to the foregoing or necessary or desirable in order to accomplish the foregoing.

RECORDED
\$ JUL 10 1961
OFFICE OF THE CLERK
STATE OF FLORIDA

ARTICLE IV

The aggregate number of shares which the professional association is authorized to issue is one hundred (100); such shares shall be of a single class, and shall have a Par Value of One Dollar (\$1.00) per share.

ARTICLE V

The physical address of the initial office of the professional association is 6388 Silver Star, Suite 2B, Orlando, Florida 32818, the mailing address being the same, and the name of the initial registered agent is Nasir Alarakhia, M.D., whose address is 6388 Silver Star, Suite 2B, Orlando, Florida 32818.

ARTICLE VI

The number of directors constituting the initial board of directors of the professional association is one (1). The name and address of each person who is to serve as a member of the initial board of directors is Nasir Alarakhia, M.D. 6388 Silver Star, Suite 2B, Orlando, Florida 32818.

ARTICLE VII

The name and address of the incorporator of these articles is Nasir Alarakhia, M.D., 6388 Silver Star, Suite 2B, Orlando, Florida 32818.

Executed by the undersigned at Orlando, Florida, on this, the 29th day of June, 1995.



Nasir Alarakhia, M.D.
Incorporator

Having been named as Registered Agent and to accept service of process for the above stated professional association at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provision of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.


Nasir Alarakhia, M.D.
Registered Agent

FILED
95 JUL 10 PM 1:00
CLERK OF STATE
TALLAHASSEE FLORIDA

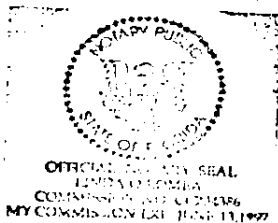
STATE OF FLORIDA
COUNTY OF ORANGE

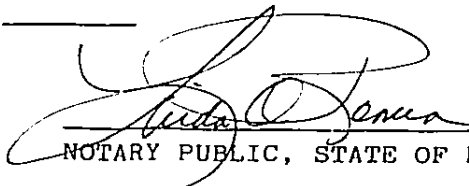
BEFORE ME, and officer duly authorized in the State of Florida aforesaid and in the County of aforesaid to take acknowledgments, personally appeared Nasir Alarakhia, M.D., who is the person described in and who executed the foregoing Articles of Incorporation as the Incorporator, and he acknowledged to and before me that he executed the same for the uses and purposes therein mentioned and set forth.

IN WITNESS THEREOF, I have hereunto set my hand and seal at Orlando in Orange County and the State of Florida this, the 29th day of June, 1995.

- Personally known to me,
 who has produced Driver's License as identification;
 who did not take an oath;
 who did take an oath;

S E A L




NOTARY PUBLIC, STATE OF FLORIDA