P95000066940

August 14, 1995

Secretary of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

RE: The Medical Legal Partnership, Inc.

200001503692 -08/17/95--01077--009 ****122.50

Gentlemen:

Enclosed please find the original and one copy of the Articles of Incorporation, together with my check in the amount of \$122.50.

This represents the cost of Filing Fees, Certified Copy of Articles of Incorporation and Fee for Registered Agent Designation for the above named corporation.

Very truly yours,

Kymberly M. Barnes

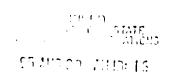
The Medical Legal Partnership, Inc.

The Medical Legal Partnership, Inc. 2759 SE Eagle Drive, Suite 221 Port St. Lucie, FL 34984-8918 (407) 871-1759

1395 NO 724

cr 8/30/95





FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

August 18, 1995

THE MEDICAL LEGAL PARTNERSHIP, INC. ATTENTION: KIMBERLY M. BARNES 2759 SOUTHEAST EAGLE DRIVE PORT ST. LUCIE, FL 34984-8918

SUBJECT: THE MEDICAL LEGAL PARTNERSHIP, INC.

Ref. Number: W95000016724

We have received your document for THE MEDICAL LEGAL PARTNERSHIP, INC. and your check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6973.

Claretha Golden Document Specialist

Letter Number: 795A00038894

ARTICLES OF INCORPORATION

(name of corporation) The undersigned subscriber(s) to these Articles of Incorporation, natural person(s) competent to contract, hereby form a corporation under the laws of the State of Florida.

THE MEDICAL LEGAL PARTNERSHIP, INC.

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ARTICLE 1 - CORPORATE NAME						
The name of the corporation is:						
THE MEDICAL LEGAL PARTNERSHIP, INC.						
ARTICLE II - DURATION						
This corporation shall exist perpetually unless dissolved according to Florida law.						
ARTICLE III - PURPOSE						
The corporation is organized for the purpose of engaging in any activities or business permitted under the laws of the United States and the State of Florida.						
ARTICLE IV - CAPITAL STOCK						
The corporation is authorized to issue ONE THOUSAND shares (1000) of one						
Dollar(s) (\$ 1.00) par value Common Stock, which shall be designated "Common Shares."						
ARTICLE V - INITIAL REGISTERED OFFICE AND AGENT						
The street address of the Initial Registered Agent office and the name of the Initial Registered Agent at that office is:						
NAME Kymberly M. Barnes						
ADDRESS 2759 SE Eagle Drive						
CTTY PORT St. Lucie FLORIDA ZIB4984-8918						
The principal office, if known, or the mailing adress of the corporation is:						
NAME: The Medical Legal Partnership, Inc.						
ADDRESS 2759 SE Eagle Drive,						
CITY PORT St. Lucie, FLORIDA ZIP 34984_8918						
ARTICLE VI - INITIAL BOARD OF DIRECTORS						
This corporation shall have one (1) directors initially. The number of directors may be either increased or diminished from time to time by the By-Laws, but shall never be less than one (1). The names and addresses of the initial director(s) of the corporation are as follows:						
NAME Kymberly M. Barnes						
ADDRESS 2759 SE Eagle Drive						
CITY Port St. Lucie STATE Florida ZIP 34984-8918						
NAME XXXXXXXXXXXXXXXXXXXXXXXXXXXXXX						
ADDRESS						
CTTY STATE ZIP						
NAMI! XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX						
ADDRESS						
CITY STATE ZIP SEMINOLE-MIAMI 012593						
FORM 215: ARTICLES OF INCORPORATION, PAGE 1 PAGE 1						

ARTICLE VII - INCORPORATORS

The names and addresses of the incorporators signing these Articles of Incorporation are as follows:

NAME	Kymborly M. Barnes					
ADDRESS	2759 SE Eagle Drive					
CTIY	Port St. Lucie	SIMTE Florida	ZIF 34984-891			
NAME		xxxxxxxxxxx				
ADDRESS						
CTIY		STATE	ZIP			
NAME	***********	xxxxxxxxxx				
ADDRESS						
CTTY		STATE	ZIP			
IN WITNESS WHEREOF, the undersigned subscriber(s) have executed these Articles of Incorporation this 14						
	<u>August</u> • ¹⁹ 95 •	Lesmberia Princes	SIGN HERE			
		******	XXXXXXX (Scal)			
		xxxxxxxxxxxxxxxxx	XXXXXXXX (Scal)			

CERTIFICATE AND ACKNOWLEDGEMENT OF REGISTERED AGENT

FILED SCOTTIANY OF STATE DIVIDED FOR COURSEASTIONS

CERTIFICATE OF REGISTERED AGENT

OF

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THE	MEDICAL	LEGAL	PARTNERSHIP,	INC.

(name of corporation)

Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted: The above corporation, desiring to organize under the laws of the State of Florida with its registered office as indicated in the Articles of Incorporation

at ______ 2759 SE Eagle Drive,

Port St. Lucie, FLorida 34984-8918

has named _____ Kymberly M. Barnes
located at the aforesaid address, as its Registered Agent to accept service of process within this state.

ACKNOWLEDGEMENT

Having been named as Registered Agent to accept service of process for the above stated corporation at the place designated in this certificate, and being familiar with the obligations of that position, I hereby accept to act in this capacity, and agree to comply with the provisions of Florida Law in keeping open said office.

Kymbuly M. Barnes (registered agent)