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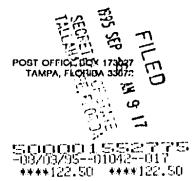
### NCY G. FARAGE

PROPESSIONAL ASSOCIATION APTORNILY AT LAW

TELEPHONE: (813)221-5603 FACSIMILE: (813)224-0102

4th Floor Tempa Theatre Building 707 North Franklin Street Tampa, Fiorida 33602

August 2, 1995



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#### BY FEDERAL EXPRESS

Division of Corporations Department of State The Capitol Room 2002, North Monroe Tallahassee, FL 32310-8047

West Coast Medical Services, Inc.

Gentlemen:

Enclosed please find an original and one copy of the Articles of Incorporation for the above-named corporation. Please file the original Articles and return a certified copy to me.

Also enclosed is a check in the amount of \$122.50, representing the filing fee of \$35.00, certified copy fee of \$52.50, and a registered agent fee of \$35.00.

Thank you for your assistance and cooperation in this matter.

Sincerely yours,

NANCY G. FARAGE Dictated by Ms. Farage but signed in her absence

to avoid delay in delivery

NGF:llv Enclosures



#### FLORIDA DEPARTMENT OF STATE

August 4, 1995

Sandra B. Mortham Secretary of State

NANCY G FARAGE ESQUIRE P O BOX 173027 TAMPA, FL 33672

SUBJECT: WEST COAST MEDICAL SERVICES, INC.

Ref. Number: W95000015734

We have received your document for WEST COAST MEDICAL SERVICES, 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):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Simply adding "of Florida" or "Florida" to the end of an entity name **DOES NOT** constitute a difference. Please select a new name and make the substitution in all appropriate places. One or more words may be added to make the name distinguishable from the one presently on file.

When the document is resubmitted, please return a copy of this letter to ensure that your document is properly handled.

If you have any questions about the availability of a particular name, please call (904) 488-9000.

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) 487-6904.

Freida Chesser Corporate Specialist

Letter Number: 695A00036693

#### NANCY G. FARAGE

PROFESSIONAL ASSOCIATION APPORNING AT LAW

TELEPHONE: (813)221-5603 FACSIMILE: (813)224-0102

4th Floor Tampa Theatre Building 707 North Franklin Street Tampa, Florida 33602 POST OFFICE BOX 173027 TAMPA, FLORIDA 33072

August 30, 1995

Division of Corporations
Attention: Freida Chesser, Corporate Specialist
Department of State
The Capitol
Room 202, North Monroe
Tallahassee, FL 32310-8047

Re: Cambridge Medical Services, Inc.

Dear Ms. Chesser:

Enclosed please find an original and one copy of the Articles of Incorporation and the original and one copy of a Certificate Designating Registered Agent for the above-named corporation. Floase file the original Articles and return a certified copy to me.

I have also enclosed a copy of your letter to me dated August 4, 1995 wherein you returned our previous filing of "West Coast Medical Services, Inc." "Cambridge Medical Services, Inc." is being incorporated in its place, and the check in the amount of \$122.50 previously forwarded to you and being held by you should be used to cover the filing fee of \$35.00, certified copy fee of \$52.50, and a registered agent fee of \$35.00 for this corporation.

Thank you for your assistance and cooperation in this matter. Should you have any questions regarding the enclosed documents, please contact my office immediately.

Sincerely yours,

NANCY C PAD

NGF: 11v Enclosures

#### ARTICLES OF INCORPORATION

OF

#### CAMBRIDGE MEDICAL SERVICES, INC.



The undersigned subscriber to these Articles of Incorporation, a natural person competent to contract, hereby forms a corporation under the laws of the State of Florida.

#### ARTICLE I

#### NAME OF CORPORATION

The name of the corporation shall be:

CAMBRIDGE MEDICAL SERVICES, INC.

#### ARTICLE II

#### NATURE OF BUSINESS

This corporation may engage in or transact any or all lawful activities or business permitted under the laws of the United States, the State of Florida, or any other state, country, territory or nation.

#### ARTICLE III

#### CAPITAL STOCK

The maximum number of shares that this corporation is authorized to have outstanding at any one time is One Hundred (100) shares having a par value of One Dollars (\$1.00) per share.

#### ARTICLE IV

#### TERM OF EXISTENCE

This corporation is to exist perpetually.

#### ARTICLE V

#### REGISTERED OFFICE AND AGENT

The street address of the initial principal office of this corporation is 500 North Westshore Boulevard, Suite 720, Tampa, Florida 33609, and the name of the initial registered agent of this corporation at that address is Gary Smith.

#### ARTICLE VI

#### INITIAL BOARD OF DIRECTORS

This corporation shall have one (1) director initially. The number of directors may be either increased or diminished from time to time by the By-Laws adopted by the shareholders. The name and address of the initial director of this corporation are:

Address

Gary Smith 500 North Westshore Boulevard

Suite 720

Tampa, FL 33609

#### ARTICLE VII

#### **SUBSCRIBERS**

The name and post office address of the subscriber to these Articles of Incorporation are:

Name Address

Gary Smith 500 North Westshore Boulevard

Suite 720

Tampa, FL 33609

#### ARTICLE VIII

#### BY-LAWS

The Board of Directors is authorized to adopt By-Laws, including provisions governing the issuance of stock certificates

to replace lost or destroyed stock certificates and provisions prohibiting the transfer of the stock of the corporation and of the preemptive rights to such stock, provided such By-Laws are not contrary to the laws of the State of Florida.

#### ARTICLE IX

#### **AMENDMENT**

These Articles of Incorporation may be amended in the manner provided by law. Every amendment shall be approved by the Board of Directors proposed by them to the stockholders and approved at a stockholders' meeting by a majority, or such greater number as may be specified in the By-Laws, of the shares of stock entitled to vote thereon unless all the directors and the stockholders sign a written statement manifesting their intention that a certain amendment of these Articles of Incorporation be made.

IN WITNESS WHEREOF, the undersigned has made, subscribed and acknowledged these Articles of Incorporation, this 297% day of August, 1995.

Cary Smith

STATE OF FLORIDA

COUNTY OF HILLSBOROUGH

BEFORE ME, a Notary Public authorized to take acknowledgements in the State and County set forth above, personally appeared Gary Smith, who is personally known to me, who did take an oath, and who

is known to me to be the person who executed the foregoing Articles of Incorporation, and he acknowledged before me that he executed the same for the purposes therein expressed.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my seal in the State and County aforesaid this  $29^{12}$  day of 800057,

1995.

LISA C. SMITH
My Cemm Exp. 3/21/99

Bonded By Service Ins
No. CC447160

Personally Known [] Other 1. D.

NOTARY PURILE Print Name:

My commission expires:

FILED
1995 SEP -6 AM 9
SECRETARY OF SIAM
TALLAHASSEE, FI OR

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## CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section 607.0501, Florida Statutos, the undersigned corporation, organized under the law of the state of Florida, submits the following statement in designating the registered agent, in the state of Florida.

1.	The name of the corporation is: Campridge Medic	al	
	Sorvicos, Inc.		
2.	The name and address of the registered agent and	OFFICE SEP	
	Gary Smith		:
	(NAME)	SSE -6 F	_
	TOO Namely Mantakana Bankanand Cuito 720	THE STATE OF THE S	1 7
	500 North Westshore Boulevard, Suite 720 (P.O. BOX NOT ACCEPTABLE)	- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	•
	(F.O. DON MOT MODEL TIDEL)	<b>宝工 49</b>	
	Tampa, FL 33619	學所 表	
	(CITY/STATE/ZIP)	<b>-</b>	
	C/AM		
	SIGNATURE		
	Gary Smith		
	TITLE Incorporator		
	DATE	129 95	
		•	
HAVII	ING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT	SERVICE OF	
PRUCE	CESS FOR THE ABOVE STATED CORPORATION AT THE PLACE D S CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS	REGISTERED	
AGENT	NT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGR	EE TO COMPLY	
HTIW	H PROVISIONS OF ALL STATUTES RELATING TO THE PROPER .	AND COMPLETE	
PERFO	FORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND	ACCEPT THE	
OBLIC	IGATIONS OF MY POSITION AS REGISTERED AGENT.		
	signature (MM		
	Gary Smith ,	<u> </u>	
	DATE	29/95	

# P9500069452

#### ARTICLES OF MERGER Merger Sheet

**MERGING:** 

CAMBRIDGE MEDICAL SERVICES, INC., a Florida corporation, document number P95000069452

CHIROPRACTIC SERVICES, INC., a Florida corporation, document number P95000060185

INTO

CENTER FOR SPINE AND PAIN THERAPY, INC., a Florida corporation, P95000060188

File date: February 16, 1996

Corporate Specialist: Karen Gibson