

**LAW OFFICES OF
J. JEROME MILLER**

Attorneys At Law

415 Mountain Drive

Suite 3

Destin, Florida 32541

J. Jerome Miller
Lamar Conerly, Jr.

(904) 837-3860
FAX (904) 837-6158

September 5, 1995

Secretary of State
Corporate Records Bureau
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32301

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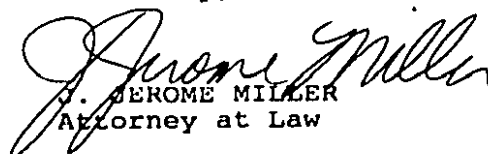
Re: DESTIN FAMILY HEALTH CENTER, P.A.

To Whom It May Concern:

Enclosed herewith please find the original and one copy of the executed Articles of Incorporation, as well as the Acceptance of registered agent, for filing, in regard to the above-referenced corporation. Also enclosed is a check in the amount of \$122.50 to cover the fee in this respect. Upon filing, please return the copy of the Articles in the envelope provided.

Thank you for your assistance in this matter. If you should have any questions, please do not hesitate to contact me.

Sincerely,


J. JEROME MILLER
Attorney at Law

JJM/jld
Enclosures (as stated)
cc: Henry M. Haire, M.D.

SEP 13 1995

BSB

FILED
95 SEP -3 AM 9:08
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION
OF
DESTIN FAMILY HEALTH CENTER, P.A.

FILED
95 SEP -8 AM 9:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I

NAME

The name of this Corporation is DESTIN FAMILY HEALTH CENTER,
P.A..

ARTICLE II

DURATION

This Corporation shall have perpetual existence.

ARTICLE III

PURPOSE

The purposes for which the Corporation is formed are as follows:

1. To engage in the general practice of medicine.
2. To invest its funds in real estate, mortgages, stocks, bonds, or any other type of investment and to own real or personal property necessary for the rendering of the professional services specified above.
3. To do such acts and carry on such business as may be permitted by the rules and regulations of the State of Florida, as they pertain to professional corporations and subject to the limitations thereof.

ARTICLE IV

CAPITAL STOCK

The Corporation is authorized to issue 7,500 shares of \$1.00

par value common stock, which shall be designated "common shares".

ARTICLE V

PRE-EMPTIVE RIGHTS

Every shareholder, upon the sale of any new stock of this Corporation of the same kind, class or series as that which he already holds, shall have the right to purchase his pro rata share (as nearly as may be done without issuance of fractional shares) at the price at which it is offered to others.

ARTICLE VI

INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office of this Corporation is 415 Mountain Drive, Suite #3, Destin, Florida, 32541, and the initial registered agent of this Corporation at that address is J. JEROME MILLER.

ARTICLE VII

INITIAL BOARD OF DIRECTORS

This Corporation shall have at least one (1) director 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. The name and address of the initial director of this Corporation is:

Henry M. Haire, M.D.
789 Miracle Strip Parkway
Mary Esther, Florida 32569

ARTICLE VIII

PRINCIPAL OFFICE

The principal office and mailing address of this Corporation is 348 Miracle Strip Parkway, S.W., Fort Walton Beach, Florida 32548.

ARTICLE IX

INCORPORATOR

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

Henry M. Hairo, M.D.
789 Miracle Strip Parkway
Mary Esther, Florida 32569

ARTICLE X

INDEMNIFICATION

The Corporation shall indemnify any officer or director, or any former officer or director, to the full extent permitted by law.

ARTICLE XI

ACTION BY DIRECTORS OR SHAREHOLDERS WITHOUT A MEETING

The directors or shareholders of this Corporation may take action by written consent as provided by law.

IN WITNESS WHEREOF, the undersigned incorporator has executed these Articles of Incorporation this 5th day of September, 1995.


HENRY M. HAIRE, M.D.

STATE OF FLORIDA
COUNTY OF OKALOOSA

BEFORE ME, the undersigned authority authorized in the State and County aforesaid to take acknowledgements personally appeared HENRY M. HAIRE, M.D., who is personally known to me and he is the person who executed the foregoing Articles of Incorporation and he acknowledged before me that he executed the same.

IN WITNESS WHEREOF, I have hereunto set my hand and official seal this 5th day of September, 1995.

(SEAL)


NOTARY PUBLIC

J. JEROME MILLER
NOTARY PUBLIC, STATE OF FLORIDA
My Comm. Expires June 5, 1999
Comm. No. CC 465060

ACCEPTANCE

I HEREBY am familiar with and accept the duties and responsibilities as registered agent for DESTIN FAMILY HEALTH CENTER, P.A..


J. JEROME MILLER

STATE OF FLORIDA
COUNTY OF OKALOOSA

BEFORE ME, the undersigned authority authorized in the State and County aforesaid to take acknowledgements personally appeared J. JEROME MILLER who is personally known to me and he is the person who executed the foregoing Acceptance and he acknowledged before me that he executed the same.

IN WITNESS WHEREOF, I have hereunto set my hand and official seal this 5th day of September, 1995.

(SEAL)


NOTARY PUBLIC

★ SUE C. WALLACE ★
★ NOTARY PUBLIC, STATE OF FLORIDA ★
★ MY COMMISSION EXPIRES JULY 27, 1999 ★
★ COMM. NO. CC 012288 ★
