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

700001591667 -09/22/95---01064--010 -++++*78.75--++++*78.75 JUAN MEDINA, P.A. SUBJECT: (Proposed corporate name - must include suffix) Enclosed is an original and one (1) copy of the articles of incorporation and a check for: | |\$131.25 \$122.50 | X \$78.75 \$70.00 Filing Fee. Filing Fee Filing For Filing Foo Certified Copy & Cortified Copy & Cordicate & Certificate SOUTHWEST PROFESSIONAL SLRVICES OF FORT MYERS, INC. FROM: Name (printed or typed) 13611 Mcgregor Blvd (#3) Address Fort Myers, Fl 33919 City, State & Zip Daytime Telephone number

NOTE: Please provide the original and one copy of the articles.

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ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under Chapter 621 of the laws of the State of Florida, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

Juan Medina, P.A.

The principal place of business and mailing address of this corporation shall be:

1120 Royal Palm Beach Blvd Apt 210 Royal Palm Beach, Fl 33411

ARTICLE II NATURE OF BUSINESS

This corporation may engage in every aspect of the business of rendering the same professional services that a Nurse Anesthesist, duly licensed or otherwise legally authorized to render; and, engage in any and every other activity permitted, from time to time, for a corporation so formed to engage in.

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at one one time is:

100 Shares

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

Southwest Professional Services Inc 13611 Mcgregor Blvd Suite #3 Fort Myers, Fl 33919

ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

Juan Medina 1120 Royal Palm Beach Blvd (#210) ROyal Palm Beach, Fl 33411

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section 607.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the state of Florida.

Southwest Professional Services of Fort Myers, Inc. (NAME) 13611 Mcgregor Blvd Suite #3 (P.O. BOX NOT ACCEPTABLE) Fort Myers, Fl 33919 (CITY/STATE/ZIP)	(NAME) 13611 Mcgregor Blvd Suite #3 (P.O. BOX NOT ACCEPTABLE)	
13611 Mcgregor Blvd Suite #3 (P.O. BOX NOT ACCEPTABLE) Fort Myers, F1 33919 (CITY/STATE/ZIP)	13611 Mcgregor Blvd Suite #3 (P.O. BOX NOT ACCEPTABLE)	
(P.O. BOX NOT ACCEPTABLE) Fort Myers, F1 33919 (CITY/STATE/ZIP)	(P.O. BOX NOT ACCEPTABLE)	 .
Fort Myers, F1 33919 (CITY/STATE/ZIP)	,	 .
(CITY/STATE/ZIP)	Fort Myers, Fl 33919	
		:
, a d	(CITY/STATE/ZIP)	
SIGNATURE Jum Whichen	SIGNATURE CHANNE OF BANKE	
	SIGNATURE	idun
SIGNATURE (dorporate officer) Title President	SIGNATURE THAT	

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION 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 PROVISIONS 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.

Southwest Professional Service of

SIGNATURE Fort Myers, INC.

DATE

REGISTERED AGENT FILING FEE: \$35.00