

EXAMINER'S INITIALS: T. BROWN JAN 3 0 1996

FILED 96 JAN 30 PH 1: 48 SECRETARY OF STATE TALLAMASSEE, FLORIDA

ARTICLES OF INCORPORATION

OF

PAN AMERICAN HEALTH NETWORK, INC.

The undersigned incorporator hereby forms a corporation under Chapter 607 of the laws of the State of Florida.

ARTICLE I. NAME

The name of the corporation shall be:

PAN AMERICAN HEALTH NETWORK, INC.

The address of the principal office of this corporation shall be 200 East Robinson Street, Suite 865, Orlando, Florida 32801, and the mailing address of the corporation shall be the same.

ARTICLE II. NATURE OF BUSINESS

This corporation may engage or transact in 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 of stock that this corporation is authorized to have outstanding at any one time is 10,000 shares of common stock having \$.10 par value per share.

ARTICLE IV. REGISTERED AGENT

The street address of the initial registered office of the corporation shall be 200 East Robinson Street, Suite 865, Orlando, Florida, 32301, and the name of the initial registered agent of the corporation at that address is Robert O. Marks, Esquire.

ARTICLE V. TERM OF EXISTENCE

This corporation is to exist perpetually.

ARTICLE VI. INCORPORATOR

The name and street address of the incorporator to these Articles of Incorporation:

Corporation Service Company 1201 Hays Street Tallahassee, Florida 32301

IN WITNESS WHEREOF, the undersigned agent of Corporation Service Company, has hereunto set their hand and seal of Corporation Service Company on January 29, 1996.

CORPORATION SERVICE COMPANY

Its Agent, Gail Shelby

ACCEPTANCE OF REGISTERED AGENT DESIGNATED IN ARTICLES OF INCORPORATION OF THE SECOND

ROBERT O. MARKS, ESQUIRE, having a business office address of 200 East Robinson Street, Suite 865, Orlando, Florida 32801, and having been designated as the Registered Agent in the above and foregoing Articles, is familiar with and accepts the obligations of the position of Registered Agent under Section 607.0505, Florida Statutes.

Robert O. Marks, Esquire
O'Neill, Chapin, Marks,
Liebman, Cooper & Carr
200 East Robinson Street
Suite 865
Orlando, Florida 32801
telephone (407) 425-2751

O'NEILL, CHAPIN, MARKS, ŁIEBMAN, COOPER & CARR

ATTORNEYS AND COUNSELORS AT LAW A PARTHERBHIP OF PROFESSIONAL ASSOCIATIONS

HERNARD C. O'HEILL, JR., P. A. BRUCE E. CHAPIN, R.A. HOBERT O. MARKS, M.A. JOHN B. LIEBMAN, R.A. MARK O. COOPER, P.A. GEORGE E. CARM LISA M. HARRIS

HODNEY C. LUND

800 CAST HORIHBON STREET BUILT SON ORLANDO, FLORIDA 32801 TELEPHONE (407) 428-2781

600000

April 11, 1996

State of Florida Department of State Division of Corporations Post Office Box 6327 Tallahassee, Florida 32314

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PAN AMERICAN HEALTH NETWORK, INC., a Florida Corporations document number P96000009393

Ladies and Gentlemen,

Please find enclosed, for filing among the Division's records the following:

Statement of Intent to Adopt Amendment-> Returns

Articles of Amendment (b)

I also enclose my check number 2971, in the amount of \$35.00, as payment of the filing fee.

Please return a time-and-date stamped copy as verification of filing. Thank you.

Sincerely

Robert O. Marks

ROM/pbo enclosures

APR 2 3 1996

ARTICLES OF AMENDMENT OF PAN AMERICAN HEALTH NETWORK, INC., a Plorida Corporation



Article I of the Articles of Amendment of PAN AMERICAN HEALTH NETWORK, INC. is hereby amended to read:

ARTICLE I. NAME

The name of this corporation is WINTER PARK 159, INC.

The foregoing amendment was adopted by the shareholders of this corporation on the 9th day of April, 1996.

IN WITNESS WHEREOF, the undersigned President and Secretary of this corporation have executed these Articles of Amendment on this 9th day of April, 1996.

witnesses:	
(print) Carricia B. Olso	(sign) Coll V. Marko ROBERT O. MARKS
sign Im doller print) Larde, Rifez	(sign) WWW - Warks ROBERT O. MARKS Secretary

STATE OF FLORIDA COUNTY OF ORANGE

Vatricia B.Ol		
Notary Public signature Notary name, typed/printed: Serial Number: My Commission Expires:	ALT OF FORM	PATRICIA B OLES My Commission CC409025 Expires Sep. 21, 1998 Bonded by HAI 800-422-1555