P96000047504

Transmittal Letter for a Horida Corporation

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

SUBJECT:

(Proposed corporate name - must include suffix)

AESTHETIC SURGERY CLINIQUE OF PALM BEACH, INC.

Encrosed an original and one copy of the articles of incorporation and a Designation and Acceptance of Registered Agent for a Florida Corporation.

Please provide a certified copy of these articles.

A check for \$122.50 is enclosed. FROM: (signature)

RETURN TO: David Rowe 631 Executive Center Dr. #204 W. Pulm Beach, Fl. 33401-4935

Daytime Telephone: 561-471-1010

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ARTICLES OF INCORPORATION

OI:

AESTRETIC SURGERY CLINIQUE OF PALM BEACH, INC. ARTICLE CORPORATE NAME.

The name of this corporation is AESTETIC SURGERY CLINIQUE OF PALM BEACH, INC.

ARTICLE J. PRINCIPAL OFFICE.

The principal place of business and mailing address of this corporation are 535 SO, FLAGLER Dr. W. Palm Beach, 11, 33401

ARTICLE HE CAPITAL STOCK.

The number of shares of stock that this corporation is authorized to have outstanding at any one time is twenty-five(25) shares of common stock at no par

ARTICLE IV. INITIAL REGISTERED AGENT AND OFFICE.

The name and address of the initial registered agent are Jerome W. Cruft 535 S. Flugler Dr. W. Palm Beach, Fl. 33401

ARTICLE V. INCORPORATORS.

The name(s) and street address(es) of the incorporator(s) of these articles of incorporation are same as above.

OPTIONAL PROVISIONS.

This corporation may perform all functions of a medical practice, and render any appropriate medical care in conjunction therewith.

The undersigned (has)(have) executed these articles of incorporation on 23.M. a.u., 1996

(Affinetare)

erome w. Craft mp

EROME W. CRAFT, M.D., PRESIDENT, AND REG. AGENT

Designation and Acceptance of Registered Agent for a Horida Corporation

Pursuant to the provisions of F.S. 607.0501, 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.

- 1. The name of the corporation is ALST HETIC SURGERY CLINIQUE OF PALM BEACH, INC.
 - 2. The name of the registered agent is JEROMI, W. CRAFT, M.D.
- 3. The address of the registered agent/registered office is 535 S. Flagler Dr. W. Main Beach, Fl. 33401.

Acceptance

Having been named as registered agent and designated to accept service of process for the above corporation. Hereby accept the accountment 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 the position as registered agent.

JIROME W. CRAFT, M.D.

Dute: 23 May 76