

P96000052397

Transmittal Letter for a Florida Corporation

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

SUBJECT: (Proposed corporate name - must include suffix)

DOCTOR'S SURGICAL CENTER, INC.

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

600001866976  
-06/19/96--01057--007  
\*\*\*\*\*122.50 \*\*\*\*\*122.50

Please provide a certified copy of these articles.

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

*David Rows*

RETURN TO: David Rows  
631 Executive Center Dr. #204  
W. Palm Beach, FL 33401-4935  
Daytime Telephone: 561-471-1010

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96 JUN 18 PM 3:14  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

6/19/96  
*[Signature]*

ARTICLES OF INCORPORATION

OF

DOCTOR'S SURGICAL CENTER, INC.

ARTICLE I. CORPORATE NAME.

The name of this corporation is DOCTOR'S SURGICAL CENTER, INC.

ARTICLE II. PRINCIPAL OFFICE.

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

ARTICLE III. 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. Craft  
535 S. Flagler Dr. W. Palm Beach, Fl. 33401

ARTICLE V. INCORPORATORS.

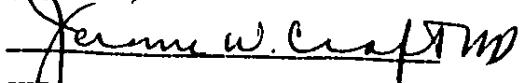
The name(s) and street address(es) of the incorporator(s) of these articles of incorporation are same as above.

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 May 1990

(signature)



JEROME W. CRAFT, M.D., PRESIDENT, AND REG. AGENT  
(title)

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TALLAHASSEE, FLORIDA

Designation and Acceptance of Registered Agent for a  
Florida 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 DOCTOR'S SURGICAL CENTER, INC.
2. The name of the registered agent is JEROME W. CRAFT, M.D.
3. The address of the registered agent/registered office is 535 S. Flagler Dr. W. Palm Beach, Fl. 33401.

Acceptance

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

(signature)

Jerome W. Craft  
JEROME W. CRAFT, M.D.

Date: 23 May 96

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