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PHONE (941) 337-0062 I'AX (941) 337-0406

TANDEM CHATER SUITE 199 333 S. TANIAMI TRAIL VENICE, FLORIDA 34285

PHONE (941) 485-8200 FAX (941) 488-9436

ATTORNEYS AND COUNSELORS AT LAW

ANTHONY J. AHATH SARALYN ABUL DAVID S. BAND KATHRYN ANGELL CARRY STEVEN J. CHASE** RONALD L. COLLIER DALE S. DAVIDSON JOHN A. GARNER

HARVEY J. ABEL

CHERYL L. GONDON SCOTT B. CONDON MARK D. HILDRETH ... WILLIAM R. KORP CHRISTINU BOWARDS LAMIA MARK W. MCFALL DIADLBY D. MAGER GEORGE H. MAZZARANTANI

> OF COUNSEL RICHARD W. COONBY

JAN WALTERS PITCHFORDS MALCOLM J. PHEHIORDS JEFFRHY S. RUSSELLY MICHAEL S. TAAFFIL WM. JERH TOLTON, III. DAVID S. WATSON JOHN W. WIST III PRILIP C. ZIMMURMAN

JOHNSON S. SAVARY

Il-Mall: abeiband@gate.net

ADDITIONAL JURISDICTIONS

DAVID S. BAND-WASH, DC & MD JAYID S. HAND-WASH, DC & N RONALD L. COLLIER-PA & NJ AMHONY J. ARABULA STEVEN J. CHASE CIA MICHAEL S. TAAPIENJ & NY MARK W. MCFALLTX BARLEY D. MARIO CIL A TAL MARK W. MCFALLTX
BRADLEY D. MAGEBOH & TN
PHILLE C. ZIMMERMAN-CO
JOHN A. GARNER-IN & GA
DAVID S. WATSON FA
SCOIT II. GORDON OH
RICHARD W. COONEY-NY
JOHN W. WEST III-DC
DALE S. DAVIDSON-NC

*Board Certified Real Estate Lawyer
**Board Certified Civil Tital Lawyer
**Board Certified Business Bankruptcy Law
American Bankruptcy Board of
Certification Section 8

6800-1 Please refer to our file number:

Writer's direct line: Sarasota

300001933463

****122.50 ****122.50

-08/27/96--01139--019

Reply to:

August 23, 1996

Bureau of Corporate Records Division of Corporations P. O. Box 6327 Tallahassee, Florida

> Re: Southwest Pain Medicine Physicians, P.A.

Dear Sir or Madam:

Enclosed please find original and duplicate of Articles of Incorporation of the above named corporation, together with a check in the amount of \$122.50 to cover the following items: កូ -11

Filing of Articles of Incorporation \$35.00 Certified Copy of Articles 52.50 Registered Agent 35.00

We would appreciate your returning to us a certified copy of the Articles of Incorporation in the enclosed, self-addressed stamped envelope.

Very truly yours,

ABEL, BAND, RUSSELL, COLLIER, PITCHFORD & GORDON, CHARTERED

> Rebecca J. Kennedy, C.I.A. Certified Legal Assistant

Enclosures

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ARTICLES OF INCORPORATION

OF

SOUTHWEST PAIN MEDICINE PHYSICIANS, P.A.

The undersigned incorporator, for the purpose of forming a Corporation for profit under the Professional Service Corporation Act, hereby adopts the following Articles of Incorporation:

ARTICLE I - NAME

The name of this Corporation is:

SOUTHWEST PAIN MEDICINE PHYSICIANS, P.A.

ARTICLE II - TERM OF EXISTENCE

The Corporation is to exist perpetually.

ARTICLE III - PURPOSES

The purposes of the Corporation are to engage in the practice of medicine and any activity or business permitted under the laws of the United States and the State of Florida.

ARTICLE IV - CAPITAL STOCK

The shares of stock of this Corporation shall consist of only one class. The number of shares of stock that this Corporation is authorized to have outstanding at any one time is 1,000 Shares of Common Stock having a par value of \$1.00 per share.

ARTICLE V - PRINCIPAL OFFICE

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

240 S. Pineapple Avenue 10th Floor Sarasota, Florida 34236

ARTICLE VI - INITIAL REGISTERED AGENT AND ADDRESS

The registered agent and the street address of the registered office of this Corporation is:

Michael S. Taaffe

240 S. Pineapple Avenue 10th Floor Sarasota, Florida 34236

ARTICLE VII - AMENDMENT

These Articles of Incorporation may be amended in certain instances by the Board of Directors as provided by statute and in certain instances by resolutions adopted by the Board of Directors, proposed by them to the Shareholders and approved at a Shareholders Meeting by a majority of the stock entitled to vote thereon.

ARTICLE IX - INCORPORATOR

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

Michael S. Taaffe

240 S. Pineapple Avenue 10th Floor Sarasota, Florida 34236 The undersigned has executed these Articles this 2 day

Michael S. Taaffe

"INCORPORATOR"

Having been named as Registered Agent and to accept service of process for SOUTHWEST PAIN MEDICINE PHYSICIANS, P.A. at the place designated in the Articles, 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.

Date /

Michael S. Taaffe Registered Agent

> 11.ED 11.ED 11.88EF 11.2:

BARNETT BANK CENTER 340 BOUTH PINEAPPLE AVENUE P. C. BOK 49946 BARABOTA, PLOSENA 34230-4940

WATS (FROM TAMEN) 645-7105 Process (941) 366-8660 PAX (941) 366-3999

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TAIDMI CHITER SUTTE 199 333 S. TAMAME TRAIL. VIDECE, FLORINA 34365

PHONE (941) 485-8300 PAX (941) 486-9436

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> OF COUNSEL RICHARD W. COONEY

JAN WALTERS PITCHFORD* MALCOLM J. PITCHFORDS Jacquery S. Russielle MICHAEL & TAAPPE DAVID S. WATSON JOHN W. WINT III

JOIDWON S. SAWARY

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MARE W. MCFALLTX
BRADLEY D. MAGINGH & TN
JOHN A. GARMED IN & GA
DAVID S. WATSON PA
SCOTT B. GORDON GH
RICHAED W. COMBY-NY
JOHN W. WEST III-DC
DALE S. DAVIDON NC

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October 2, 1996

Bureau of Corporate Records Division of Corporations P. O. Box 6327 Tallahassee, Florida 32314

> Southwest Pain Medicine Physicians, P.A. Re:

Dear Sir or Madam:

Enclosed please find an original Statement of Change of Registered Office and Registered Agent for filing. I have also enclosed a check in the amount of \$35.00 to cover the filing fee.

We would appreciate your returning to us an acknowledgement of this filing in the enclosed, self-addressed envelope.

Thank you for your attention to this matter.

Very truly yours,

ABEL, BAND, RUSSELL, COLLIER, PITCHFORD & GORDON, CHARTERED

Bébecca J. Certified/

/Kennedy,

/bjk Enclosures

Charter No.	P96000071	707	
*			
Date Filed _	08-26-96		

STATEMENT OF CHANGE OF REGISTERED OFFICE AND REGISTERED AGENT

Pursuant to the provisions of Sections 607.0501 and 607.0502, or 607.1508, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement for the purpose of changing its registered office and registered agent in the State of Florida. 1. The name of the corporation is: Southwest Pain Medicine Physicians, P.A. 2. The name and address of its present registered agent is: Michael S. Taaffe 240 S. Pineapple Ave., 10th Floor Sarasota, Florida 34236 3. The name and street address to which its registered agent is to be changed is: (P.O. BOX NOT ACCEPTABLE) Laura Yard 775 The Rialto Venice, FL 34285 4. The street address of its registered office and the street address of the business office of its registered agent, as changed, are identical. 5. Such change was authorized by resolution duly adopted by its board of directors or by an officer of the corporation so authorized by the board of directors. Laura Yard Signature. (Typed or printed came and title) 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 FUR-THER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATION OF MY POSITION AS REGISTERED AGENT UNDER SECTION 607.0505, FLORIDA STATUTES. Laura Yard Please Print/Type Name_ (Inagh)

FILING FEE \$35

CIS 4/92