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F. DAVID'S BLCKER. ANNE SHEFFLERESHIGG ASS JAMES D. CIVE DARRINA GOLLLI GLORGER HARRISON G JOSEPHHARRISON DICINIAS W. BAUDISCHA ROBERT W HENDRICKSON OF W NUON WRITANO



Ploque Rept. to Post Other Box 400 Madunton Florida 14206-0400

Febr (9.44) 746 9229

September 13, 1996

CICH B II F (2013) 1 7 38 1 - 09/18/96 - 010/6 - 010 ****122.50 ****125.50

Secretary of State Corporate Division Post Office Box 6327 Tallahassee, Florida 32314

Occupational Health Services of Florida, Inc.

Ladies or Gentlemen:

Enclosed in duplicate are the Articles of Incorporation for the above captioned corporation together with the certificate designating the Registered Agent. We also enclose our check in the amount of \$122.50 to cover the following:

- 1. \$35.00 - Filing Fee
- \$52.50 Certified Copy of Articles
- \$35.00 Filing Registered Agent Certificate

Subsequent to filing of the enclosed Articles Incorporation, please forward the certified copy to me at the above letterhead address. Thank you for your cooperation in this matter.

Very truly yours,

HARRISON, HENDRICKSON, DOUGLASS & KIRKLAND, P.A.

By:

Thomas W. Harrison

TWH:qb Enclosures

ARTICISS OF INCORPORATION

<u>Or</u>

OCCUPATIONAL HEALTH SERVICES OF FLORIDA, INC.

The undersigned, for the purpose of forming a corporation under the provisions of Chapter 607 of the Florida Statutes, hereinafter referred to as the Corporation, hereby agrees to the following:

ARTICLE I - NAME

The name of the Corporation shall be OCCUPATIONAL HEALTH SERVICES OF FLORIDA, INC. The mailing address of the principal office of the Corporation shall be, 11915 - 45th Avenue West, Cortez, Florida 34215 and the mailing address of the corporation is Post Office Box 9, Cortez, Florida 34215.

ARTICLE II - PURPOSE AND POWERS

Section 1. The Corporation is formed for the purpose of engaging in any lawful activity or business for which corporations may be incorporated under the laws of the State of Florida.

Section 2. The Corporation may exercise all powers, rights and privileges conferred on corporations pursuant to the laws of the State of Florida.

ARTICLE III - TERM OF EXISTENCE

The corporation shall have perpetual existence.

ARTICLE IV - CAPITAL STOCK

The authorized capital stock of the Corporation shall be one thousand (1,000) shares of common stock having no par value.

ARTICLE V - BOARD OF DIRECTORS

Soction 1. The business and affairs of the Corporation shall be managed by a Board of Directors, the members of which shall be hereinafter referred to as Directors.

Section 2. The initial Board of Directors of the Corporation shall consist of one (1) Directors, whose name and address is as follows:

NAME

ADDRESS

STEPHEN A. HAERING, M.D.

Post Office Box 9 Cortez, Florida 34215

Section 3. The number of Directors shall be as provided in the Bylaws of the Corporation, but shall not be less than one (1).

Section 4. Directors shall be elected and hold office as provided in the Bylaws.

ARTICLE VI - BYLAWS

Section 1. The Board of Directors shall adopt Bylaws for the Corporation at a meeting of the Board of Directors following the filing of these Articles of Incorporation.

Section 2. The power to adopt, alter, amend or repeal the Bylaws of the Corporation may be exercised by the Board of

Directors or the Shareholders in accordance with the provisions of the Bylaws.

Section 3. Any Bylaws adopted by the Board of Directors or the Shareholders may be altered, amended or repealed by the other group; provided, however, that any Bylaws adopted by the Shareholders may provide that it shall be altered, amended, or repealed only by the Shareholders.

ARTICLE VII - AMENDMENTS

These Articles of Incorporation may be amended as set forth in the Florida Statutes, as amended from time to time.

ARTICLE VIII - REGISTERED OFFICE AND AGENT

Section 1. The street address of the initial registered office of the Corporation shall be 11915 - 45th Avenue West, Cortez, Florida 34215.

Section 2. The name of the initial registered agent of the Corporation located at said address shall be STEPHEN A. HAERING, M.D..

ARTICLE IX - INCORPORATOR

The name and address of the incorporator is:

NAME

ADDRESS

STEPHEN A. HAERING, M.D.

Post Office Box 9 Cortez, Florida 34215

who is personally known to me,
who produced _______ as
identification.

WITNESS my hand and official seal in the County and State last aforesaid this /2 day of Sentember, 1996.

me that he executed the same. I relied upon the following form of

identification of the above named person:

Devillean 7

Printed Name

Signature

Notary Public-State of Florida

Commission No._____

My Commission Expires:

GERALDEAN P. BOZZA

Figure Public, State of Florida

The Public State of Florida

The Public State of Florida

CC250271

ACCRPTANCE

I horoby accept to act as initial Registered Agent for OCCUPATIONAL HEALTH SERVICES OF FLORIDA, INC. as stated in those Articles of Incorporation.

STEPHEN A. HAERING, M.D.

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CORP\ARTICLES