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

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Enclosed is an origin for :	el and one (1) o ### ###############################	### \$122.50 Filing Fee & Certiled Copy Additional Copy	#131.25 Filing Fee, Certified Copy & Certificate	SE TAL	3
FROM:	Colin J.	Campbell (printed or typed)		OCI -2 CRETARY LAHASSI	
		verleaf Oak Ct.	a de la companya de l	PHI2:	
	.	Address		2: 03 0RIDA	-
		h Gardens , F1.	33410		
	<u>/</u> (561) 625	-6360			•
/	Daytime	Telephone number		•	j.
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NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

Medical Resource Associates Inc.

96 OCT -2 PH IZ: 03
SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLE II & PRINCIPAL OFFICE

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

2002 Silverleaf Oak Ct. Palm Beach Gardens, F1: 33410

ARTICLE III SHARES

The number of shares of stock that this corporation is suthorized to have outstanding at any one time is:

100 Shares of Common Stock to be divided evenly between

Colin J. Campbell (50 shares) and Anthony Patrick Hayes (50 Shares)

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS
The name and address of the initial registered agent is:

Colin J. Campbell 2002 Silverleaf Oak Ct. Palm Beach Gardens, Fl. 33410

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

- I. Colin J. Campbell 2002 Silverleaf Oak Ct. Palm Beach Gardens, F1. 33410
- II. Anthony Patrick Hayes 120 Parkwood Dr. Royal Palm Beach, Fl. 33411

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

11 th day of September , 19 96 .

(An additional article must be added if an effective date is requested.)

Signature

Mature

Signature

Notarization is not required

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, 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:	Medical Resource	Associates Inc.		
2. The name and address of the r	registered agent and office is:	SECRETARY TALLAHASSE		
Colin J. Campbell			96 OCT	maria .
(NAMZ) 2002 Silverleaf Oak Ct. (P.O. Box or Mail Drop Box NOT ACCEPTABLE)			-2 PH	
Palm Be	ach Gardens , F1. 334 (CHY/STATE/ZE)	F STATE SLORIDA	12: 03	· Lund

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 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.

Klan | Completel (6/m T Campbil) 09-11-96
(SIGNATURE) (DATE)