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-03/17/97--01037--004  
\*\*\*\*122.50 \*\*\*\*122.50

March 13, 1997

Division of Corporations, New Corporations  
POB 6327  
Tallahassee, Florida 32314

Dear Sir:

Enclosed are the Articles of Incorporation for  
Definitive Orthopedic, Inc. and our check for \$122.50 for  
filing fees and a certified copy of the articles and a  
certificate of incorporation.

Please return the documents to:

Benjamin H. Moore  
1400 West Fairbanks Avenue, Ste 201  
Winter Park, FL 32789

Thank you for your attention to this matter.

Sincerely,



Ben H. Moore

FILED  
97 MAR 17 AM 10:02  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

B. REGISTER MAR 21 1997

# ARTICLES OF INCORPORATION

Definitive Orthopedic, Inc.

*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:

Definitive Orthopedic, Inc.

## ARTICLE II PRINCIPAL OFFICE

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

1260 N. Maryland Street  
Sanford, FL 32771

## ARTICLE III SHARES

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

1,000 shares at a \$1.00 Par value

## ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Peter H. Allen  
1260 North Maryland Street  
Sanford, FL 32771

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TALLAHASSEE, FLORIDA

**ARTICLE V INCORPORATOR(S)**

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

Peter H. Allen  
1260 North Maryland Street  
Sanford, FL 32771

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

\_\_\_\_\_ 12th day of \_\_\_\_\_ March, 19 97 .



\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

**Articles of Incorporation  
Filing Fee - \$35**

## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 or 617.0501, 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: Definitive Orthopedic, Inc.

2. The name and address of the registered agent and office is:

Peter H. Allen

(Name)

1260 North Maryland Street

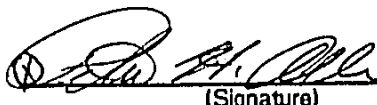
(P.O. Box not acceptable)

Sanford, FL 32771

(City/State/Zip)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*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.*

  
(Signature)

\_\_\_\_\_  
(Date)