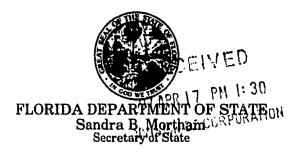
☐ POST OFFICE BOX 477 CRABTREE, P.A. P.O. BOX 477 JACKSONVILLE, FLORIDA 32201 GEOFFREY HEEKIN, P.A. JACKSONVILLE, FL 32201 SCOTT W. FALLAR 8375 DIX ELLIS TRAIL, SUITE 401 S. HUNTER MALIN **JACKSONVILLE, FLORIDA 32256** ANN KRUEGER SMITH (904) 464-0665 CHERYL LYNN VIRTA TELECOPIER (904) 464-0554 April 5, 1997 ☐ 50 NORTH A1A, SUITE 103 A. M. CRABTREE, JR. PONTE VEDRA BEACH, FLORIDA 32082 (1924-1995) (904) 285-5299 TELECÒPIÉR (904) 285-1640 Attorney's Title Insurance Fund, Inc. 660 East Jefferson Street, Suite 200 Tallahassee, FL 32301 300002137283--1 *****70.00 *****70.00 Ms. Barbara Keys Attention: EFFECTIVE DATE .5.91 Dear Ms. Keys: Enclosed please find an original and one copy of the of Incorporation of Stuart K. Bergman, M.D., P.A., and a sheck payable to the Secretary of State in the amount representing our filing fee. I am also enclosing our firm's check in the amount of \$20.00 to cover the cost of Attorneys' Title Insurance Fund, Ing. 61119 the Articles of Incorporation specifically on the date of receiff. Please call me at (904) 464-0009 if any additional information is required. Very truly yours, Assistant to T. Geoffrey Heekin /acb Encl 6sures: Mookin1\docs\DOCCO\clients.Lt\AMERI\INCORP\ATTORNEY.LTR



April 9, 1997

ATTORNEY'S TITLE INSURANCE FUND, INC. 660 E JEFFERSON STREET SUITE 200 TALLAHASSEE, FL 32301

SUBJECT: STUART K. BERGMAN, M.D., P.A.

Ref. Number: W97000008256

We have received your document for STUART K. BERGMAN, M.D., P.A. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The specific nature of business of the professional association must be stated in the document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6932.

Kimberly Rolfe Document Specialist

Letter Number: 997A00017835

ARTICLES OF INCORPORATION

OF

STUART K. BERGMAN, M.D., P.A.

97 APR -9 PH 4: 10
SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLE I - NAME

The name of this Corporation is Stuart K. Bergman, M.D., P.A., and the principal business address of the Corporation is 5240 Riverton Road, Jacksonville, FL 32277.

ARTICLE II - COMMENCEMENT AND DURATION

Pursuant to Section 607.0203, Florida Statutes, this Corporation shall commence upon the date of execution of these Articles of Incorporation. This Corporation shall have perpetual existence.

ARTICLE III - PURPOSE

This Corporation is organized for the purpose of transacting any and all lawful business. The nature of the business is anesthesiology services.

ARTICLE IV - CAPITAL

This Corporation is authorized to issue 1,000 shares of Common Stock, all of which shall have a par value of \$1.00 per share.

ARTICLE V - INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office of this Corporation is 8375 Dix Ellis Trail, Suite 405, Jacksonville, Florida, 32256, and the name of its initial registered agent at such address is T. Geoffrey Heekin.

ARTICLE VI - INITIAL BOARD OF DIRECTORS

The number of Directors constituting the initial Board of Directors of this Corporation shall be one (1), and the names and address of the person who is to serve as the member thereof is:

<u>Name</u>

Address

Stuart K. Bergman

5240 Riverton Road Jacksonville, FL 32277

ARTICLE VII - INCORPORATOR

The name and address of the incorporator is:

<u>Name</u>

Address

T. Geoffrey Heekin

P.O. Box 477 Jacksonville, FL 32201

IN WITNESS WHEREOF, the undersigned incorporator has executed these Articles of Incorporation this 5 day of and 1997.

T. Geoffrey Heekin

CERTIFICATE DESIGNATING PLACE OF BUSINESS OF DOMICILE FOR THE SERVICE OF PROCESS WITHIN FLORIDA, NAMING AGENT UPON WHOM PROCESS MAY BE SERVED

In compliance with Section 48.091, Florida Statutes, the following is submitted:

First, that Stuart K. Bergman, M.D., P.A., desiring to organize or qualify under the laws of the State of Florida, with its principal place of business at the City of Jacksonville, State of Florida, has named T. Geoffrey Heekin, 8375 Dix Ellis Trail, Suite 405, Jacksonville, FL 32256, as its agent to accept service of process within Florida.

T. Geoffrey Heekin, Incorporator

Date: 4/5 , 1997

Having been named to accept service of process for the abovestated corporation, at the place designated in this certificate, T. Geoffrey Heekin hereby agrees to act in this capacity and it further agrees to comply with the provisions of all statutes relative to the proper and complete performance of its allies.

> Name: T. Geoffrey Heekin Address: P.O. Box 477 Jacksonville, FL 32201

Date: 4/3 , 1997