# CSC P9700005668

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REFERENCE: 437532 80981A

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ORDER DATE: June 23, 1997

ORDER TIME : 10:18 AM

ORDER NO. : 437532-005

CUSTOMER NO: 80981A

CUSTOMER: Charles P. Chritton, Esq

WENDEL CHRITTON & PARKS

5300 S. Florida Avenue

Lakeland, FL 33813

#### DOMESTIC FILING

NAME:

PAIN MANAGEMENT & WELLNESS According 12.

#### EFFECTIVE DATE:

XX ARTICLES OF INCORPORATION
CERTIFICATE OF LIMITED PARTNERSHIP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY
PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: W. Charles Earnest

EXAMINER'S INITIALS:

RECEIVED

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#### FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

June 23, 1997

## RESUBMIT

**CSC NETWORKS** 1201 HAYS ST. TALLAHASSEE, FL 32301-2607

Please give original submission date as file date.

SUBJECT: PAIN MANAGEMENT & WELLNESS CENTER, P.A.

Ref. Number: W97000014580

We have received your document for PAIN MANAGEMENT & WELLNESS CENTER, P.A. and your check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Simply adding "of Florida" or "Florida" to the end of an entity name DOES NOT constitute a difference. Please select a new name and make the substitution in all appropriate places. One or more words may be added to make the name distinguishable from the one presently on file.

When the document is resubmitted, please return a copy of this letter to ensure that your document is properly handled.

If you have any questions about the availability of a particular name, please call (904) 488-9000.

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) 487-6052.

Sandy Ng **Document Specialist** 

Letter Number: 897A00033234

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 3:

97 JUN 23 AM 10: 17
TALLAHASSEE, FLORIDA

#### ARTICLES OF INCORPORATION

**OF** 

#### PAIN MANAGEMENT & WELLNESS ASSOCIATES, P.A.

The undersigned incorporator, for the purpose of forming a corporation under Chapter 621 of the Florida Statutes, does ordain and establish these Articles of Incorporation.

#### ARTICLE I.

The name of the corporation shall be PAIN MANAGEMENT & WELLNESS ASSOCIATES, P.A.

#### ARTICLE II.

The street address of the principal office of the corporation is 343 Heatherpoint Drive, Lakeland, Florida 33809, and the mailing address of the corporation is 343 Heatherpoint Drive, Lakeland, Florida 33809.

#### ARTICLE III.

The corporation shall engage in no business other than the rendering of professional medical services through officers, employees, and agents who are duly licensed or otherwise legally authorized to render professional medical services within the State of Florida; provided, however, this provision shall not be interpreted to include in the term "employee," as used in this Article, clerks, secretaries, bookkeepers, technicians, and other assistants who are not usually and ordinarily considered by custom and practice to be rendering professional medical services to the public for which a license or other legal authorization is required; and provided further, that nothing contained in this Article shall be interpreted to prohibit the corporation from investing its funds in real estate, mortgages, stocks, bonds, or any other type of investments, or from owning real or personal property necessary for the rendering of professional medical services.

#### ARTICLE IV.

Section 1. The number of shares which the corporation is authorized to issue is 1,000 shares having a par value of \$0.01 each.

Section 2. The corporation shall not issue any of its capital stock to anyone other than a professional corporation, a professional limited liability company, or an individual who is duly licensed or otherwise legally authorized to render professional medical services in the State of

Florida. No shareholder of the corporation shall enter into a voting trust agreement or any other type of agreement vesting another person with the authority to exercise the voting power of any or all of that person's stock.

- Section 3. If any officer, shareholder, agent, or employee of the corporation who has been rendering professional medical services to the public becomes legally disqualified to render such professional services within the State of Florida or accepts employment that, pursuant to existing law, places restrictions or limitations upon that person's continued rendering of such professional services, that person shall sever all employment with, and financial interests in, the corporation forthwith.
- <u>Section 4.</u> No shareholder of the corporation shall sell or transfer his shares in the corporation except to another professional corporation, professional limited liability company, or individual, each of which must be eligible to be a shareholder of the corporation.
- Section 5. Nothing contained in this Article shall be interpreted to require that the right of an individual to be a shareholder of the corporation is dependent upon the present or future existence of an employment relationship between him and the corporation, or his present or future active participation in any capacity in the production of the income of the corporation or in the performance of the services rendered by the corporation.

#### ARTICLE V.

The street address of the corporation's initial registered office is c/o Wendel, Chritton & Parks, Chartered, 5300 South Florida Avenue, Lakeland, Florida 33813, and the name of its registered agent at that address is Charles P. Chritton.

#### ARTICLE VI.

The name and address of the sole incorporator of the corporation is GORDON W. ONDRA, M.D., 343 Heatherpoint Drive, Lakeland, Florida 33809.

The undersigned incorporator has executed these Articles of Incorporation this <u>13</u> day of June, A.D. 1997.

GORDON W. ONDRA. M.D., Incorporator

### ACCEPTANCE OF DESIGNATION AS REGISTERED AGENT

I, CHARLES P. CHRITTON, having been named to serve as Registered Agent for PAIN MANAGEMENT & WELLNESS ASSOCIATES, P.A. do hereby accept such office and agree to conduct myself therein according to law. I am familiar with, and accept the obligations of such office.

DATED this <u>13</u> day of June, A.D. 1997.

CHARLES P. CHRITTON

PMWC/p

FILED

97 JUN 23 AN IO: 17

SECHETARY DE STATE
TAITLAHASSEE FLORIDA