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BOARD CERTIFIED REAL ESTATE LAWYER
DAVID N. MORRISON

TELECOPIER (841) 648-8140

July 15, 1997

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***122.50 ***122.50

Secretary of State of Florida
The Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

Re: Articles of Incorporation of Perlmutter Hyperbaric Center, Inc.

Dear Sir/Madam:

Enclosed please find an original and one copy of Articles of Incorporation for the above-referenced transaction. Also enclosed is a check in the amount of \$122.50 to cover the following costs:

- 1. \$35.00 - Filing Fee;
- 2. \$35.00 - Designation of Registered Agent;
- 3. \$52.50 - Certified Copy of the Articles of Incorporation.

TOTAL AMOUNT DUE - \$122.50

Should you have any questions, please feel free to call. Otherwise, your prompt attention to this matter is appreciated.

FILED
97 JUL 18 AM 9:18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Very truly yours,

MORRISON & CONROY, P.A.

David N. Morrison
David N. Morrison

DNM/tlg
Enclosures

PA 7000063071

ARTICLES OF INCORPORATION
OF
PERLMUTTER HYPERBARIC CENTER, INC.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FIRST: The name of the corporation (the "Corporation") is PERLMUTTER HYPERBARIC CENTER, INC.

SECOND: The principal office of the Corporation is 800 Goodlette Road North, Suite 270, Naples, Florida 34102.

THIRD: The purpose or purposes for which the Corporation is organized are to engage in the transaction of any or all lawful business for which corporations may be incorporated under the provisions of the Florida Business Corporation Act.

FOURTH: The aggregate number of shares which the Corporation shall have authority to issue is one thousand (1,000) shares of common stock, and the par value of each such share is One and 00/100 Dollars (\$1.00).

FIFTH: The street address of the initial registered office of the Corporation is 3838 Tamiami Trail North, Suite 402, Naples, Florida 34103, and the name of its initial registered agent at such address is David N. Morrison.

SIXTH: The number of Directors constituting the initial Board of Directors of the Corporation is two (2). The number of Directors may be increased from time to time by the Bylaws, but shall never be less than one (1). The name and address of the initial Directors of the Corporation are:

Stephen V. Robison
c/o Morrison & Conroy, P.A.
3838 Tamiami Trail North, Suite 402
Naples, Florida 34103

David Perlmutter, M.D.
c/o Morrison & Conroy, P.A.
3838 Tamiami Trail North, Suite 402
Naples, Florida 34103

SEVENTH: The name and address of the person signing these Articles is David N. Morrison, 3838 Tamiami Trail North, Suite 402, Naples, Florida 34103.

EIGHTH: The power to adopt, alter, amend or repeal Bylaws shall be vested in the Board of Directors and the Shareholders.

NINTH: This Corporation reserves the right to amend or repeal any provisions contained in these Articles of Incorporation, or any amendment to them, and any rights conferred upon the Shareholders are subject to this reservation.

IN WITNESS WHEREOF, the undersigned Subscriber, for the purpose of forming a corporation under the Florida Business Corporation Act, has executed these Articles of Incorporation this 15th day of July, 1997.



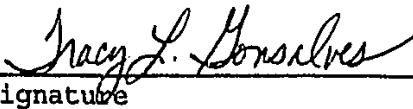
DAVID N. MORRISON, Subscriber

STATE OF FLORIDA

COUNTY OF COLLIER

The foregoing instrument was acknowledged before me this 15th day of July, 1997 by DAVID N. MORRISON, who is personally known to me or who has produced _____

(type of identification) as identification and who did (did not) take an oath. NOTE: If a type of identification is not inserted in the blank provided, then the person executing this instrument was personally known to me. If the words in the parenthetical "did not" are not circled, then the person executing this instrument did take an oath.



Signature

(Type or print Name of Acknowledger)

I, the undersigned person, having been named as registered agent and to accept service of process for the above-stated Corporation at the place designated in this statement, 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.



DAVID N. MORRISON

Date: July 15, 1997

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA