

P97000076402

**Edwin Tunick, C.P.A., P.A.**

3201 West Commercial Blvd.

Suite 225

Ft. Lauderdale FL 333019

(954) 772-2150 FAX (954) 777-3016

8/26/97

Department of State  
Division of Corporation  
P.O. Box 6327  
Tallahassee, FL 32314

~~200002282182--9~~  
~~09/02/97--01063--016~~  
~~\*\*\*\*122.50 \*\*\*\*122.50~~

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SUBJECT: **Delta Medical Management Consultants Inc.**

Enclosed is an original and one (1) copy of the articles of incorporation and a check for \$122.50.

FROM: **Delta Medical Management Consultants Inc.**  
3201 W. Commercial Blvd. Suite 225  
Ft. Lauderdale, FL 33309

AL SEP - 4 1997

FILED  
97 SEP - 2 AM 8:40  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLES OF INCORPORATION  
OF  
Delta Medical Management Consultants Inc.**

**FILED**  
97 SEP -2 AM 8:40  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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: Delta Medical Management Consultants Inc.

**ARTICLE II PRINCIPAL OFFICE**

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

3201 W. Commercial Blvd. Suite 225  
Ft. Lauderdale, FL 33309

**ARTICLE III SHARES**

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 10,000,000 Shares and \$.001 par value.

**ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS**

The name and address of the initial registered agent is:

Edwin Tunick  
3201 W. Commercial Blvd. Suite 225  
Ft. Lauderdale, Fl 33309

**ARTICLE V INCORPORATOR(S)**

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

Edwin Tunick  
3201 W. Commercial Blvd. Suite 225  
Ft. Lauderdale, Fl 33309

The undersigned incorporator(s) has (have) executed these Articles of Incorporation this  
27 day of August, 1997.

Signature

Edwin Tunick

**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

**FILED**  
97 SEP -2 AM 8:40  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Pursuant to the provision of sections 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 : Delta Medical Management Consultants Inc.
2. The name and address of the registered agent and office is:

Edwin Tunick  
3201 W. Commercial Blvd. Suite 225  
Ft. Lauderdale, Fl 33309

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: \_\_\_\_\_

8/27/97