P98000006277

Transmittal Letter

Corporations Division:

Please file the enclosed articles of incorporation and certificate of designation or registered agent/office. Enclosed is:

An original Articles of Incorporation

- An original Certificate of Designation of Registered Agent / Office
- A check in the amount of \$78.75.

Optional Services Requested:

Please provide a certificate of incorporation.

Physician's Practice Solutions, Inc.

M Shane Williams 3628 Park Street, Suite 11 Jacksonville, Florida 32205

904-388-1652

Please send responses or receipts concerning this filing to the above address.

Thank you very much.

December 29, 1997

X/2/152

Articles of Incorporation of Physician's Practice Solutions, Inc.



Pursuant to Chapter 607 of the Florida Business Corporation Act, the undersigned incorporator submits these articles of Incorporation for the purposes of forming a forprofit corporation.

Article 1. The Name of the corporation is:

Physician's Practice Solutions, Inc.

Article 2. The principal place of business and mailing address of this corporation is:

3628 Park Street, Suite 11, Jacksonville, Florida 32205

Article 3. The corporation is authorized to issue one class of stock, that being 1000 shares of no par value, common stock, with identical rights and privileges, the transfer of which is restricted according to the bylaws of the corporation.

Article 4. The name and address of the corporation's initial registered agent is:

M. Shane Williams 3628 Park Street, Suite 11, Jacksonville, FL 32205

Article 5. The name and address of the incorporator of this incorporation is:

M. Shane Williams 3628 Park Street, Suite 11, Jacksonville, FL 32205

Article 6. No Director shall be held liable to the corporation or its shareholders for monetary damages due to breach of fiduciary duty, unless the breach is a result of self-dealing, intentional misconduct, or illegal actions.

In witness whereof, the undersigned incorporator has executed these Articles of Incorporation on the date below.

December 29, 1997

M. Shane Williams

M. Showe Williams

Certificate of Designation of Registered Office and Registered Agent

Pursuant to section 607.0501 of The Florida <u>Business Corporation Act</u>, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office and agent, in the State of Florida.

1.	The name and address of the con	rporatio	on's registere	ed agent	and	regist	ered	office	e is:
	M. Shane Williams					: . <u>.</u> .			
	3628 Park Street, Suite 11								

Jacksonville, Florida 32205

SECRE FARY OF STATE OF STATE OF CORPORATIONS

Having been named as the 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.

M Shave Williams

December 29, 1997