000036765

DATE APRIL 6, 1998

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

				****122.50°	****122.5
Re:	M.D. SE	RVICES (Name of Co	ENTERPRISES Orporation)	, Inc.	
Gentlemen:			•		
Enclosed please find the origin check in the amount of \$122.5	nal and one cop	y of the A	Articles of Incorpo	oration, togethe	r with my
This represents the cost of the Registered Agent Designation	Filing Fees, Ce for the above n	rtified Co	opy of Articles of I	Incorporation a	nd Fee for
	7	ery truly	yours.	SECRETARY TALLAHASSI	F1L 98 APR 20
			JEFFREY M (Indiv	MADDEN THE	1LED 13
		-	M.D. SERVI	CES ENTERPRI of Corporation)	ISES, IAIC,
JOHN PARTICA GAVE AUTHORIZATION BY PHONE TO CORRECT CORP. NAME	e e e e e e e e e e e e e e e e e e e	1	Alling address (ION —
DATE <u>4-23-98</u> DOC. EXAM <u>GN</u>	QNu-23-98	I.	ANTANA, FL. JOHN ACCOUNTA		
	Ch	(561)	ACCOUNTA PHON 738-0042	涯 ———	

Area Code

Ext.

ARTICLES OF INCORPORATION

of

M.D. SERVICES ENTERPRISES, INC.

(name of corporation)

The undersigned acting as the incorporators of a corporation under the Florida Business Corporation Act, adopt(s) the following articles of incorporation for such corporation:

	ARTICLE I - CORPORATE NAME	
The name of the corporation is:		98 SE(
	M.D. SERVICES ENTERPRISES, INC.	
This corporation shall exist perpetually	ARTICLE II - DURATION y unless dissolved according to Florida law.	PR 20 M 9 13 TARY OF STATE HASSEE, FLORIDA
	ARTICLE III - PURPOSE	:
The corporation is organized for the pu United States and the State of Florida.	rpose of engaging in any activities or business p	ermitted under the laws of the
The corporation is authorized to issue _	ARTICLE IV - CAPITAL STOCK 500 shares of common stock, par value \$	1.00 per share.
	TICLE V - INITIAL PRINCIPAL OFFICE al office and, if different, the mailing address is:	
STREET ADDRESS		
129 N. OAK STR	EEST C/O MADDEN	
CITY LANTANA	FLORIDA	^{ZIP} 33462-3203
Mailing address, if different	-	<u> </u>
STREET ADDRESS		
CITY	FLORIDA	ZIP
	· INITIAL REGISTERED OFFICE AND AGE	ENT

The street address of the initial registered office and the name of the initial registered agent at the office is:

NAME	JEFFREY M. MADDEN		
ADDRESS	129 N. OAK STREET		
CITY	LANTANA	FLORIDA	ZIP334623203

Form 215- ARTICLES OF INCORPORATION PAGE 1

ARTICLE VII	- INITIAL BOARD	OF DIRECTORS

NAME	JEFFREY M. MADDEN	· · · · · · · · · · · · · · · · · · ·	
ADDRESS	129 N. OAK STREET	1	
CITY	LANTANA	STATE FL.	ZIP 33462-3203
NAME			-
ADDRESS			
CITY		STATE	ZIP
NAME			
ADDRESS			,
CITY		STATE	ZIP
CITY	LANTANA	STATE FL.	ZIB34623203
ADDRESS	JEFFREY M. MADDEN 129 N. OAK STREET		
	LANTANA	STATE FL.	ZIB34623203
NAME			
ADDRESS		-	
CITY		STATE	ZIP
JARAE			J
NAME			
ADDRESS			
ADDRESS		STATE	ZIP
ADDRESS CITY ne undersigned i	ncorporator(s) have executed th	nese Articles of Incorporation this	
ADDRESS	ncorporator(s) have executed th	•	
ADDRESS CITY ne undersigned i	ncorporator(s) have executed th	nese Articles of Incorporation this	
ADDRESS CITY de undersigned i	ncorporator(s) have executed th	nese Articles of Incorporation this	6TH

CERTIFICATE OF DESIGNATION REGISTERED AGENT/ REGISTERED OFFICE

98 APR 20 AM 9: 13
SECRETARY OF STATE
ASSOCIATION OF STATE

M.D.	SERVICES ENTERPRISES, INC.
(no	ame of corporation)
	201 1 (07 0501 the following is submitted:
Pursuant to Florida Statutes Sections 48	.091 and 607.0501, the following is submitted:
The above corporation, organized under	the laws of the State of Florida with its registered office
as indicated in the Articles of Incorporate	tion
129	N. OAK STREET
atLANTAN	A, FL. 33462-3203
hac namen	FREY M. MADDEN
located at the aforesaid address, as its re	gistered agent to accept service of process within this
state.	

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.

APRIL 6, 1998
(Signature) (Date)