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FLORIDA DIVISION OF CORPORATIONS  
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TO: DIVISION OF CORPORATIONS FAX #: (850)922-4001  
FROM: FAS-T CORP. AGENTS, INC. ACCT#: 071001002335  
CONTACT: LIDIA FERNANDEZ  
PHONE: (305)599-0839 FAX #: (305)716-0346

NAME: SUNCOAST PERFUSION SERVICES, INC.  
AUDIT NUMBER.....H98000009045  
DOC TYPE.....FLORIDA PROFIT CORPORATION OR P.A.  
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mc 5/14/98

Articles Of Incorporation

of

**Suncoast Perfusion Services, Inc.**

The undersigned incorporators, for the purpose of forming a corporation under the Florida General Corporation Act, hereby adopt the following Articles of Incorporation.

**ARTICLE I**

**Name**

The name of the corporation shall be:  
**SUNCOAST PERFUSION SERVICES, INC.**

**ARTICLE II**

**Principal Office**

The principal place of business of this corporation shall be:  
**5881 18TH AVENUE, NW  
NAPLES, FL 34119**

**ARTICLE III**

**Duration**

This corporation shall exist perpetually.

**ARTICLE IV**

**Purpose**

This corporation may engage in or transact any or all lawful activities or business permitted under the laws of the United States, the State of Florida, or any other state, country, territory or nation.

**ARTICLE V**

**Shares**

The aggregate number of shares of stock and its par value that this corporation is authorized to have outstanding at any one time shall be:

**10,000 SHARES OF COMMON STOCK  
HAVING PAR VALUE AT \$0.01 PER SHARE**

Prepared By: Bruce A. Totterdale  
5881 18th Ave., NW,  
Naples, Fl. 34119  
(941)514-4534

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TALLAHASSEE, FLORIDA

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**ARTICLE VI**  
**Registered Agent**

The name and address of the initial registered agent of this corporation shall be:  
BRUCE A. TOTTERDALE  
5881 18TH AVENUE, NW, NAPLES, FL 34119

**ARTICLE VII**  
**Directors**

The names and street addresses of the persons who shall serve as directors until the first annual meeting of shareholders, or until their successors are elected, are:

BRUCE A. TOTTERDALE, 5881 18TH AVENUE, NW, NAPLES, FL 34119

**ARTICLE VIII**  
**Incorporators**

The names and street addresses of the incorporators to this articles of incorporation are:

BRUCE A. TOTTERDALE 5881 18TH AVENUE, NW, NAPLES, FL 34119

IN WITNESS WHEREOF, the undersigned incorporators have executed these Articles of Incorporation this 13th day of May, 1998.

  
\_\_\_\_\_  
Bruce A. Totterdale, Incorporator

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**CERTIFICATE OF DESIGNATION**  
**Registered Agent/Registered Office**

Pursuant to the provisions of Section 607.05, 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:  
SUNCOAST PERFUSION SERVICES, INC.
- 2. The name and address of the registered agent and office is:  
BRUCE A. TOTTERDALE  
5881 18TH AVENUE, NW, NAPLES, FL 34119

  
Signature & Title Of Corporate Officer

*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 accept the duties and obligations of my position as registered agent.*

  
Signature Of Registered Agent

DATED this 13th day of May, 1998.

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