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6/19/98

FLORIDA DIVISION OF CORPORATIONS PUBLIC ACCESS SYSTEM ELECTRONIC FILING COVER SHEET

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TO: DIVISION OF CORPORATIONS

FAX#: (850)922-4001

FROM: KRAMER, GREEN, ZUCKERMAN & KAHN, P.A.

ACCT#: 073707002173

CONTACT: SANDY TOMLIN

PHONE: (954)966-2112

FAX #: (954)981-1605

NAME: WATER'S EDGE DERMATOLOGY, INC.

AUDIT NUMBER......H98000011504

DOC TYPE.....FLORIDA PROFIT CORPORATION OR P.A.

CERT. OF STATUS...0

PAGES..... 4

CERT. COPIES.....1

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98 JUN 19 AM 8: 01
SECRETARY OF STATE
TALL AHASSEE FLORIDA

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H98000011504

ARTICLES OF INCORPORATION

OF

WATER'S EDGE DERMATOLOGY, INC.

The undersigned subscriber to these Articles of Incorporation, being a natural person, competent to contract pursuant to the provisions of Chapter 607, Florida Statutes, for the purpose of establishing a corporation, does hereby declare the following:

ARTICLE I NAME

The name of this corporation is Water's Edge Dermatology, Inc.

ARTICLE II PRINCIPAL OFFICE

The mailing address of this corporation shall be:

301 NE 19th Drive Okeechobee, FL 34972

ARTICLE III NATURE OF CORPORATE BUSINESS

This corporation may engage in any activity or business permitted under Florida law.

ARTICLE IV CAPITAL STOCK

This corporation is authorized to issue 2,000 shares of \$1.00 par value common stock which shall be designated as "Common Shares".

ARTICLE V PRE-EMPTIVE RIGHTS

Every shareholder, upon the sale for cash of any new stock of this corporation shall have the right to purchase his pro rata share thereof (as nearly as may be done without issuance of fractional shares) at the price at which it is offered to others.

Prepared by: Les K. Kushner, Bar No. 380202, 4000 Hollywood Blvd., Suite 435 S. Hollywood, FL 33021, phone: (954)966-2112

ARTICLE VI INITIAL REGISTERED OFFICE AND AGENT

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The street address of the initial registered office of this corporation is 301 NE 19th Drive, Okeechobee, Florida 34972 and the name of the initial registered agent of this corporation at that address is Theodore Schiff.

ARTICLE VII INITIAL BOARD OF DIRECTORS

The Corporation shall initially have 1 Director to hold office until the first annual meeting of stockholders and their successors shall have been duly elected and qualified, or until their earlier resignation, removal from office or death. The number of Directors may be either increased or decreased from time to time in accordance with the By-Laws of the Corporation. The name and address of the Director is:

> Theodore Schiff 301 NE 19th Drive Okeechobee, FL 34972

ARTICLE VIII INCORPORATOR

The name and address of the Incorporator signing these Articles is:

> Theodore Schiff 301 NE 19th Drive Okeechobee, FL 34972

ARTICLE IX INDEMNIFICATION

The corporation shall indemnify any Officer or Director, or any former Officer or Director, to the full extent permitted by law.

ARTICLE X AMENDMENT

This corporation reserves the right to amend or repeal any provision contained in these Articles of Incorporation, or any amendment hereto, and any right conferred upon the shareholders is subject to this reservation.

JUN-19-1998 15:40

KRAMR GREEN ZUCKRMAN KAHN

9549811605 P.04/05 - H98000011504

IN WITNESS WHEREOF, the undersigned Incorporator has executed these Articles of Incorporation on the date of signing.

Dated: ________, 1998

Theodore Schiff Incorporator

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SECRETARY OF STATEMENT ANALYSISE FLORID

CERTIFICATE DESIGNATION PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN FLORIDA, NAMING AGENT UPON WHOM PROCESS MAY BE SERVED

In compliance with Section 48.091, Florida Statutes, the following is submitted:

That <u>Water's Edge Dermatology</u>, <u>Inc.</u> desiring to organize or qualify under the laws of the State of Florida, with its principal place of business at the City of Okeechobee, State of Florida, has named Theodore Schiff, 301 NE 19th Drive, Okeechobee, State of Florida, as its agent to accept service of process within Florida.

SIGNATURE 2

TITLE

DATE

Having been named to accept service of process for the abovestated corporation, at the place designated in this Certificate, I hereby agree to act in this capacity, and I further agree to comply with the provisions of all Statutes relative to the proper and complete performance of my duties.

SIGNATURE

DATE