

JOHN INCORVIA, P.A.
Law Office

JOHN INCORVIA, JD, LL.M. IN TAXATION
FL, DC, UNITED STATES TAX COURT

OF COUNSEL:
ALAN ROTHBERG, JD, MBA
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P98000056855

Department of State
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399
(904) 487-6052

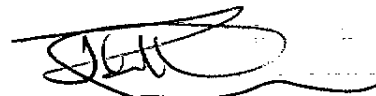
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-06/24/98-01088-001
*****78.75 *****78.75

To whom it may concern:

Enclosed herewith are the Articles of Incorporation for Doctor's Medical Network, Inc.,
a Designation of Registered Agent, and a check for \$87.75 to cover the costs for filing these,
and for a Certificate of Status.

PRIORITY MAIL

Very truly yours,


John T. Incorvia

FILED
98 JUN 24 PM 12:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

98-25-98

**ARTICLES OF INCORPORATION
OF
DOCTOR'S MEDICAL NETWORK, INC.**

ARTICLE I. NAME

The name of this corporation shall be **DOCTOR'S MEDICAL NETWORK, INC.**

ARTICLE II. PRINCIPAL OFFICE

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

3300 NE 191 Street, Building 2, unit 413, Aventura, Fl 33180.

ARTICLE III. CORPORATE PURPOSE

The corporation was formed to conduct any and all lawful business within the State of Florida.

ARTICLE IV. CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any one time is 100 shares at \$1.00 par value.

ARTICLE V. REGISTERED AGENT

The name and address of the registered agent is:

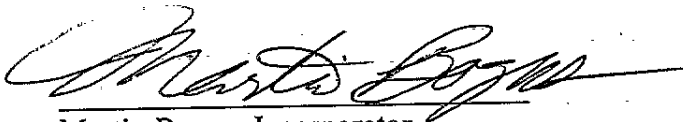
John Incorvia, Esq., 655 NW 128 Street, Miami, FL 33168

ARTICLE VI. INCORPORATOR

The name and street address of the incorporator to these Articles of Incorporation is:

Martin Bogus, 3300 NE 191 Street, Building 2, unit 413, Aventura, Fl 33180

The undersigned has executed these Articles of Incorporation this 19th day of June, 1998.



Martin Bogus, Incorporator

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98 JUN 24 PM 12:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

Pursuant to the provisions of Florida Statutes sections 48.091 and 607.501, the undersigned corporation, desiring to organize under the laws of the State of Florida, submits the following statement:

1. The name of the corporation is **DOCTOR'S MEDICAL NETWORK, INC.**
2. The address of the registered office is 3300 NE 191 Street, Building 2, unit 413, Aventura, Fl 33180.
3. The name of the registered agent is John Incorvia, Esq.

Signature: 
Martin Bogus, Incorporator

Date: 6-19-98

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, and being familiar with the duties and obligations of this position, I hereby accept appointment as registered agent, agree to act in this capacity and comply with the provisions of all statutes relating to the proper and complete performance of my duties.

Signature: 
John Incorvia, Esq., Registered Agent

Date: 6/19/98

FILED
98 JUN 24 PM 12: 01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA