TRANSMITTAL LETTER 86257

Ronald D. Lippmann D.O. Inc.

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

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SUBJECT:	(Proposed corpo	rate name - must include suf	fix)		
Enclosed is an original	and one(1) copy of the article	es of incorporation and a	check for:		
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	□\$122.50 Filing Fee & Certified Copy	\$131.2 Filing Fe Certified & Certifie	e, Copy	
		ADDITIONAL CO	PY REQUI	RED	
FROM: _	Ronald Name (Pr	D. Lippmann rinted or typed)	· · · · · · · · · · · · · · · · · · ·		
-	2835 Lon	Igleaf Rd		98 OCT SECRET	
-	Panama City,	State & Zip	2405	- Marie - Mari	lejú
-		747 8950 elephone number	— -	IO: 47 STATE	

NOTE: Please provide the original and one copy of the articles.

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ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

Ronald D. Lippmann D.O. Inc.



ARTICLE II PRINCIPAL OFFICE

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

2835 Longleaf Rd. Panama City, FL 32405

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

5000

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

Ronald D. Lippmann 2835 Longleaf Rd. Panama City, FL 32405

ARTICLE V INCORPORATOR

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

Ronald D. Lippmann 2835 Longleaf Rd. Panama City, FL 32405

Signature/Incorporator

Date

(An additional article must be added if an effective date is requested.)

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

Signature/Registered Agent

Date