

DONNA A. JACOBSEN
7425 BELLE MEADE BOULEVARD ♦ MIAMI, FL 33138
PHONE (305)758-3747 ♦ FAX (305)751-2664

January 15, 1999

P99000006912

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

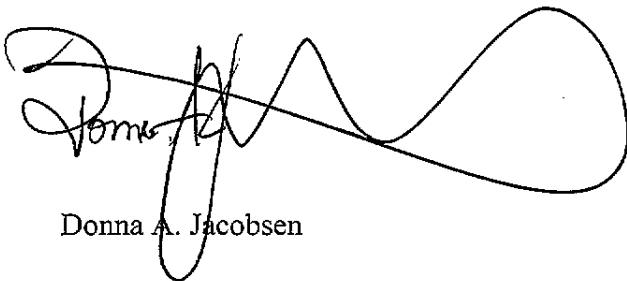
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*****87.50 *****87.50

To Whom It May Concern;

Enclosed please find the Articles of Incorporation for Donna A. Jacobsen, D.O., Inc.. They are hereby delivered to you for registration and filing. Also please find a check for \$87.50 to cover filing fees, and issuance of a Certificate of Incorporation and a Certified Copy thereof. Please send these to the address above or to the registered agent specified in the Articles.

Thank you for your kind attention to this matter.

Very truly,



Donna A. Jacobsen

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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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**Articles of Incorporation
of
Donna A. Jacobsen, D.O., Inc.**

DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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I.

Name and Principal Place of Business

The name of the Corporation is Donna A. Jacobsen, D.O., Inc., hereinafter referred to as the "Corporation." The Corporation's principal place of business shall be as follows:

3661 S. Miami Ave.
Suite #610
Miami, FL 33133

II.

Purposes

The purpose of the Corporation is to transact any and all lawful business for which corporations may be incorporated under the laws of the State of Florida, as they may be amended from time to time.

III.

Initial Registered Office and Registered Agent

The initial registered office and principal office of the Corporation is Mercy Professional Building, 3661 S. Miami Ave., Suite #610, Miami, Florida 33133. The Corporation may maintain offices and/or transact business at other locations, either within or without the State of Florida. The name and address of the registered agent for service of process upon the Corporation is Donna A. Jacobsen, Mercy Professional Building, 3661 S. Miami Ave., Suite #610, Miami, Florida 33133.

IV.

Duration

The duration of the Corporation shall be perpetual.

V.

Initial Business

The initial business of the Corporation shall be: Physician Practice, Family Medicine

VI.
Capital Stock

The Corporation is authorized to issue only one class of shares of stock which shall be designated Common Stock. The total number of shares the Corporation shall have authority to issue is one hundred (100), each share to have a par value of \$1.00 (one dollar).

VII.
Directors

The number of directors constituting the initial Board of Directors of the Corporation is: one. The name and address of the person who is appointed to act as the initial director of the Corporation is:

Director Name
Donna A. Jacobsen

Director Address
7425 Belle Meade Blvd., Miami, FL 33138

VIII.
No Personal Liability

The private property of the stockholders shall not be subject to the payment of corporate debts.

IX.
Operating Provisions

The provisions for the operation, regulations, and management of the business and internal affairs of the Corporation shall be as set forth in the Bylaws, which may be amended from time to time by a majority vote of a quorum of the Board of Directors.

X.
Fiscal Year

The fiscal year of the Corporation shall be from January 1 to December 31 of each year.

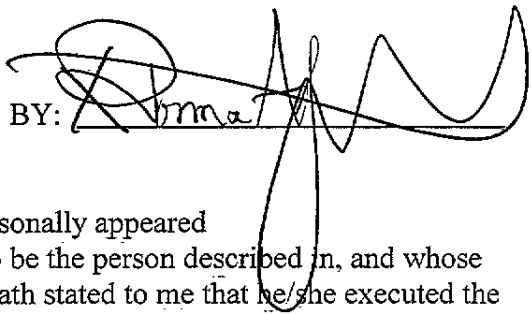
XI.
Incorporators

The names and mailing addresses of the incorporators are:

<u>Incorporator Name</u>	<u>Incorporator Address</u>
Donna A. Jacobsen	7425 Belle Meade Blvd., Miami, FL 33138

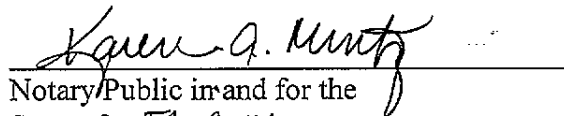
EXECUTED at Dade County, Florida on the 14th day of January, 1999.

Incorporator

BY: 

BEFORE ME, the undersigned authority, on this day personally appeared Donna A. JACOBSEN, known to me to be the person described in, and whose name is subscribed to the foregoing document, who on oath stated to me that he/she executed the same for the purposes and consideration therein expressed.

SUBSCRIBED AND SWORN TO BEFORE ME this the 14th day of January, 1999.


Notary Public in and for the
State of FLORIDA

My Commission Expires:

 **Karen A. Mintz**
Commission # CC 770735
Expires OCT. 20, 2002
BONDED THRU
ATLANTIC BONDING CO., INC.

ACCEPTANCE BY REGISTERED AGENT

Having been appointed the registered agent of Donna A. Jacobsen, D.O., Inc., the undersigned accepts such appointment, agrees to act in such capacity, and accepts the obligations imposed by Florida Statutes Section 607.0505.

BY: [Signature]

IN WITNESS WHEREOF, I have hereunto set my hand and seal on this, the 14th day of January, 1999.

State of Florida

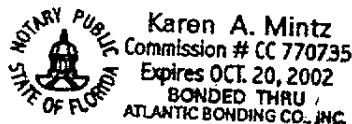
County of Polk

BEFORE ME, the undersigned authority, on this day personally appeared DONNA A. JACOBSEN, known to me to be the person described in, and whose name is subscribed to the foregoing document, who on oath stated to me that he/she executed the same for the purposes and consideration therein expressed.

SUBSCRIBED AND SWORN TO BEFORE ME this the 14th day of January, 1999.

Karen A. Mintz
Notary Public in and for the
State of FLORIDA

My Commission Expires:



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TALLAHASSEE, FLORIDA

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