### Florida Department of State

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Division of Corporations

Fax Number : (850)922-4001

From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number : 072450003255 Phone

: (305)541-3694 Fax Number : (305)541-3770

## FLORIDA PROFIT CORPORATION OR P.A.

HELEN SALSBURY, M.D., P.A.

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## ARTICLES OF INCORPORATION

OF

#### HELEN SALSBURY, M.D., F.A.

The undersigned subscribers of these Articles of Incorporation, each a natural person competent to contract, hereby associate themselves together to form a corporation under the laws of the State of Florida.

#### ARTICLE I

The name of the corporation is:

HELEN SALSBURY, M.D., P.A.

and the purpose of this corporation is the practice of medicine.

99 JAN 29 AN II: 53
SECRETANT OF STATE
TALLAHASSEE, FLORIDA

#### ARTICLE II

The address of the principal office of this corporation shall be: 5932 Vista Linda Laue, Boca Raton, Florida 34433.

#### ARTICLE III

The maximum number of shares that this corporation is authorized to have outstanding at any one time is 500 shares at \$1.00 par value. The consideration to be paid for each share shall be fixed by the Board of Directors.

This Instrument Prepared By: BARTLEY C. MILLER, ESQ. Florida Bar No. 788650 Herzfeld & Rubin 5310 N.W. 33rd Avenue, #102 Fort Lauderdale, Florida 33509 (954) 497-1110

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#### ARTICLE IV

Pursuant to 607.0501, Florida Statutes, the registered office of this corporation in the State of Florida and the Registered Agent in the State of Florida shall be Bartley C. Miller, Esq., 5310 N.W. 33<sup>rd</sup> Avenue, Suite 102, Fort Lauderdale, Florida 33309.

#### ARTICLE V

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

Helen Salsbury, M.D., 5932 Vista Linda Lane, Boca Raton, Florida 33433.

HELEN SALSBURY, M.D.
President

STATE OF FLORIDA )
COUNTY OF BROWARD )
ss.

IHEREBY CERTIFY that on this day before me, a Notary Public duly authorized in the State and County named above to take acknowledgments, personally appeared HELEN SALSBURY to me known to be the persons described as the subscribers in, and who executed the foregoing Articles of Incorporation, acknowledged before me that they subscribed to those Articles of Incorporation.

WITNESS my hand and seal this

By of Alubry 199

JOAN MARIN

Print Name

My commission expires:



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## CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN THE STATE. NAMING AGENT UPON WHOM PROCESS MAY BE SERVED.

In pursuance of chapter 48,091, Florida Statutes, the following is submitted, in compliance with said Act:

FIRST: That HELEN SALSBURY, M.D., P.A. desiring to organize under the laws of the State of Florida with its principal office, as indicated in the Articles of Incorporation at the City of Fort Landerdale, County of Broward, State of Florida, has named BARTLEY C. MILLER, ESQ., 5310 N.W. 33<sup>rd</sup> Avenue, Suite 102, Fort Landerdale, Florida 33309 as its Registered Agent to accept service of process within the State.

ACKNOWLEDGEMENT

Having been named to accept service of process for the above-stated corporation, at the place designated in this certificate, I hereby accept to act in this capacity, and agree to comply with the provision of said Act relative to keeping open said office.

BARTLEY C. MILLER Registered Agent

STATE OF FLORIDA

55,

COUNTY OF BROWARD

authority, BARTLEY C. MILLER who is known to me or has produced as identification to be the person described in and who executed the foregoing instrument, and he acknowledged before me that he executed the same instrument as his free and voluntary act and deed for the uses and purposes therein set forth and expressed.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal on this day of Quality. 1999.

My commission expires

JOAN MARIN DMMISSION & CC 64919 EXPIRES JUL 23, 2001 BONDED THEU TARY PUBLIC

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