

352-493-1458

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January 27, 1999

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

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-01/28/99--01052--006
122.50 **78.75

Attn: Articles of Incorporation

Re: Medictation, Inc.

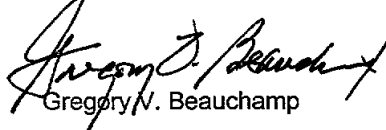
Dear Sir or Madam:

Enclosed please find the original and a copy of the Articles Of Incorporation for the above-named corporation. In addition, a check in the amount of \$122.50 is enclosed which represents the following fees:

Filing Fee	\$ 35.00
Certified Copy	35.00
Registered Agent	<u>52.50</u>
	<u>\$122.50</u>

Please file the original of the enclosed Articles of Incorporation and return a certified copy to me at your earliest opportunity.

Sincerely,


Gregory V. Beauchamp

GVB/dp
Enclosures

DMC
2-1-99

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**ARTICLES OF INCORPORATION
OF
MEDICTATION, INC.**

The undersigned, acting as incorporator of a corporation under the Florida General Corporation Act, adopt the following Articles of Incorporation for such corporation:

ARTICLES ONE: NAME

The name of this corporation shall be: MEDICTATION, INC.

ARTICLE TWO: NATURE OF BUSINESS

The general purpose for which this corporation is initially organized is to own and operate a transcribing service; and for the further purpose of engaging in any activities or business permitted under the laws of the United States and Florida.

ARTICLE THREE: DURATION

This corporation shall have perpetual existence.

ARTICLE FOUR: CAPITAL STOCK

This corporation is authorized to issue One Thousand (1,000) shares of One Dollar (\$1.00) par value common stock. By general consent of the Stockholders, it is their desire to designate the initial capital stock of this corporation as Section 1244 Stock, as defined under the Internal Revenue Code. As such stock will qualify for all rights and privileges of Section 1244 Stock.

ARTICLE FIVE: ADDRESS

The principal mailing address of the corporation is 7081 S. E. 150th Avenue, Morriston, FL 32668. The street address of the corporator's initial registered office is 7081 S. E. 150th Avenue, Morriston, FL 32668, and the name of the initial Registered Agent is HAROLD A. GOULD, whose address is 7081 S. E. 150th Avenue, Morriston, FL 32668. The stockholder may from time to time designate such other address and place as the register agent, subject to requirements of Florida law.

ARTICLE SIX: MANAGEMENT

All corporate powers shall be exercised by or under the authority of, and the business and affairs of this corporation shall be managed under the direction of, the shareholders of this corporation. Each stockholder shall be entitled to one vote in person or by proxy for each share of voting stock held by him or her. A majority of the outstanding shares of the corporation entitled to vote, represented in person or by proxy, shall constitute a quorum at any meeting of the stockholders for the management of the business of the corporation.

ARTICLE SEVEN: INCORPORATORS

The name and street address of each incorporator of these Articles Of Incorporation, the number of shares of stock each agrees to take and the value of the consideration therefore, are as follows:

<u>NAME</u>	<u>ADDRESS</u>	<u>SHARES</u>	<u>CONSIDERATION</u>
CARALEE GOULD	7081 S. E. 150TH Ave. Morriston, FL 32668	100	\$100.00
HAROLD A. GOULD	7081 S. E. 150th Ave. Morriston, FL 32668	100	\$100.00

ARTICLE EIGHT: EFFECTIVE DATE

These Articles Of Incorporation shall become effective upon approval by the Department Of State of the State of Florida.

ARTICLE NINE: AMENDMENT

The Articles Of Incorporation may be amended in the manner provided by law. Every amendment shall be approved by the stockholders and evidence of that approval shall be in writing, signed by the stockholders.

IN WITNESS WHEREOF, we have hereunto set our hands and seals and acknowledged to be filed, the foregoing Articles Of Incorporation in the Office of the Secretary of State this 27th day of ~~OCTOBER, 1998~~ JANUARY, 1999.

Caralee Gould
CARALEE GOULD

Harold A. Gould
HAROLD A. GOULD

STATE OF FLORIDA
COUNTY OF LEVY

I HEREBY CERTIFY that on this day, before me, an officer duly authorized to administer oaths and take acknowledgments, personally appeared CARALEE GOULD and HAROLD A. GOULD, known to me to be the person(s) described in and who executed the foregoing instrument, who acknowledged before me that they executed the same, that I relied upon the following form(s) of identification: () personally known or () produced identification _____. No oath(s) taken.

WITNESS my hand and official seal in the County and State last aforesaid this 27th day of ~~October, 1998~~ JANUARY, 1999.

(NOTARY SEAL)



Dorothy D. Phillips
MY COMMISSION # CC502353 EXPIRES
November 24, 1999
BONDED THRU TROY FAIR INSURANCE, INC.

Dorothy D. Phillips
Notary Signature
DOROTHY D. PHILLIPS
Notary Printed Name

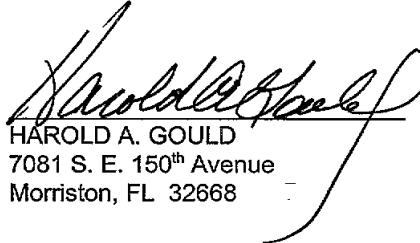
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ACCEPTANCE OF REGISTERED AGENT

The undersigned, HAROLD A. GOULD, does hereby accept the designation and appointment of Registered Agent of MEDICTATION, INC.



HAROLD A. GOULD
7081 S. E. 150th Avenue
Morrison, FL 32668