7990000 18092

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

SUBJECT: L	ighthouse Medical Group, Inc.	· -
	(proposed corporate name)	
·		
Enclosed please	find an original and one (1) copy of the	articles of incorporation for the
above corporatio	n and check in the amount of $\frac{78}{}$	75
		9000027841296
		9000027841296 -02/23/9901035009 ******78.75 *****78.75
FROM:	Randall J. Johnson	
	Name	
	2305 Greenside Court	
	Address	- 1
•	Ponte Ve orA , FL 32082	<u> </u>
	City, State, & Zip	99
	(904) 543-7716	
	Telephoné Number	
	·	<u>ω</u>

Note: Additional copy of articles is needed only when certified copy is requested.

ARTICLES OF INCORPORATION

OF

Lighthouse Medical Group, Inc.

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

ARTICLE I NAME

The name of the corporation shall be:

Lighthouse Medical Group, Inc.

ABBOATE CARENES

ARTICLE II PRINCIPAL OFFICE

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

2305 Greenside Court Ponte Ve**DRA**, FL 32082

ARTICLE III CAPITAL STOCK

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

500 Shares @ \$1.00 par value per share.

ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:

Randall J. Johnson 2305 Greenside Court Ponte Ve**DRA**, FL 32082

ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

Randall J. Johnson 2305 Greenside Court Ponte VeDRA, FL 32082

The undersigned ha	s(have) exe	cuted these Articles of Incorporation t	his
18th	day of _	February ,19 99.	
		Randall Johnson Signature/Title	President
		Signature/Title	
		Signature/Title	

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section 607.0501, Florida Statutes, the undersigned corporation, organized under the laws of the tate of Florida, submits the following statement in designating the registered office/registered agent, in the state of Florida.

П	The name and address of the registered agent and office is:	
	Randall J. Johnson	
	(NAME)	
	2305 Greenside Court	→ -
-	(P.O. BOX <u>NOT</u> ACCEPTABLE)	99
	Ponte Ve orf , Fl 32082	EB S
-	(CITY/STATE/ZIP)	3 AM 10:
	SIGNATURE Kandall (corporate	officer)
	TITLE President	
	DATE 2-18-99	·

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 Randell Johnson

DATE 2-18-99

REGISTERED AGENT FILING FEE: \$35.00