

LAW OFFICES  
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RICHARD E. SALEEBY  
RONALD RANSIER (Ret.)  
T. GRAF BUCKENMAIER, JR.

TELEPHONE (561) 655-5766  
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PLEASE REPLY TO:

P 990000 19087  
February 23, 1999

FILED  
99 FEB 25 PM 1:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Secretary of State  
Corporate Records Bureau  
Division of Corporations  
Department of State  
P.O. Box 6327  
Tallahassee, FL 32314

300002787343--6  
-02/25/99-01053-007  
\*\*\*\*\*122.50 \*\*\*\*\*78.75

RE: Accent on Health, Inc.

Dear Sir:

Enclosed please find a check in the amount of \$122.50 and the Articles of Incorporation for the above named. We would appreciate a Certified Copy of the Articles, all on letter size paper (8 1/2 x 11) if at all possible.

If for any reason these Articles cannot be recorded, due to error or correction, please telephone us at (561) 655-5766.

Thank you for your courtesy and cooperation in this matter.

Most Sincerely,

*T. Graf Buckenmaier*

T. Graf Buckenmaier

TGB/bd  
Enclosures

F. CHESSEY MAR 1 1999

## 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:

Accent on Health, Inc.

### ARTICLE II PRINCIPAL OFFICE

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

2290 10th Avenue North, Suite 605  
Lake Worth, Florida 33461

### ARTICLE III SHARES

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

750 Shares, \$10.00 Par Value, Common

### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Sherri Wallis Pinsley, D.O.  
2290 10th Avenue North, Suite 605  
Lake Worth, Florida 33461

### ARTICLE V INCORPORATOR

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

Sherri Wallis Pinsley, D.O.  
2290 10th Avenue North, Suite 605  
Lake Worth, Florida 33461

  
Signature/Incorporator Sherri Wallis Pinsley, D.O.

  
Date


\_\_\_\_\_  
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 Sherri Wallis Pinsley

  
Date

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TALLAHASSEE, FLORIDA