

ACCOUNT NO. : 072100000032

REFERENCE: 238728 7143309

SECRETARY OF STATE TALLAHASSEE, FLORIDA

AUTHORIZATION:

COST LIMIT : \$ PPD

ORDER DATE: May 13, 1999

ORDER TIME: 10:47 AM

ORDER NO. : 238728-005

CUSTOMER NO: 7143309

000002873960--5 -05/13/99--01061--025 *****70.00 *****70.00

CUSTOMER: Ruye H. Hawkins, Esq

RUYE H HAWKINS, P.A. RUYE H HAWKINS, P.A. 725 South Goldwn Avenue

Orlando, FL 32855

DOMESTIC FILING

NAME -

CENTRAL FLORIDA ANESTHESIA

CONSULTANTS, P.A.

EFFECTIVE DATE:

XX ARTICLES OF INCORPORATION
CERTIFICATE OF LIMITED PARTNERSHIP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Tamara Odom

EXAMINER'S INITIAL

RECEIVE

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FILED

99 MAY 13 AM 8: 34

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION OF CENTRAL FLORIDA ANESTHESIA CONSULTANTS, P.A.

In compliance with the requirements of F.S. Chapter 607, the undersigned, being a natural person, does hereby act as an incorporator in adopting and filing the following articles of incorporation for the purpose of organizing a business corporation.

ARTICLE I

The name of the corporation (the "Corporation") shall be:

CENTRAL FLORIDA ANESTHESIA CONSULTANTS, P.A.

ARTICLE II

This purpose for which this Corporation is organized is to provide anesthesia services.

ARTICLE III

This Corporation shall exist perpetually unless dissolved according to law.

ARTICLE IV

The street address of the principal office of the Corporation shall be:

1570 Westover Loop Heathrow, FL 32746

ARTICLE V

The maximum number of shares this Corporation is authorized to issue is 1000, all of which shall be Common Shares. All Common Shares shall be identical with each other in every respect and the holders of Common Shares shall be entitled to one vote for each share on all matters on which Shareholders have the right to vote.

ARTICLE VI

The initial street address of the Corporation's registered office shall be:

1570 Westover Loop Heathrow, FL 32746

The initial registered agent for the Corporation at that address shall be:

Julie H. Hawkins, M.D. 1570 Westover Loop Heathrow, FL 32746

ARTICLE VII

The number of Directors may be either increased or diminished from time to time by the Board of Directors or the Shareholders in accordance with the Bylaws of this Corporation, but there shall always be at least one (1) Director. The initial Board of Directors shall consist of one member. The name and address of the person who will serve on the initial Board of Directors is:

Name

Address

Julie H. Hawkins, M.D.

1570 Westover Loop Heathrow, FL 32746

ARTICLE VIII

The name and street address of the person signing these articles of incorporation is:

Name

Address

Julie H. Hawkins, M.D.

1570 Westover Loop Heathrow, FL 32746

ARTICLE IX

The Corporation shall indemnify its directors, officers, employees, and agents to the fullest extent permitted by law.

IN WITNESS WHEREOF, the undersigned incorporator has executed these Articles of Incorporation this // day of May, 1999.

Name: Julie H. Hawkins, M.D.

ACCEPTANCE OF REGISTERED AGENT

Having been named to accept service of process for CENTRAL FLORIDA ANESTHESIA CONSULTANTS, P.A. at the place designated in the Articles of Incorporation, the undersigned is familiar with and accepts the obligations of that position pursuant to F.S. 607.0501(3).

Name: Julie H. Hawkins, M.D.

Date: 5/10/99

99 MAY 13 M 8: 34 SECRETARY OF STATE SECRETARY OF STATE