TRANSMITTAL LETTER

199000068214 Department of State

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

400002941254--7 -07/26/99--01109--013 *****87.50 *****87.50

SUBJECT: SOUTH FLORIDA UROLOGIC RESEARCH ASSOCIATES, INC. (Proposed corporate name - must include suffix)

Enclosed is an original and one(1) copy of the articles of incorporation and a check for:

\$70.00

□ \$78.75

Filing Fee

Filing Fee

& Certificate of Status

\$78.75

3 \$87.50

Filing Fee

Filing Fee,

& Certified Copy

Certified Copy

& Certificate of

Status

ADDITIONAL COPY REQUIRED

FROM: Martin T. Kalish, c/o Zuckerman Spaeder, et al. Name (Printed or typed)

201 S. Biscayne Blvd., Suite 900 Address

Miami, FL 33131

City, State & Zip

305-579-0110

Daytime Telephone number

FILED

19 JUL 26 M. 9: 34

11 LANGE OF STATE

NOTE: Please provide the original and one copy of the articles.

M

ARTICLES OF INCORPORATION

OF

SOUTH FLORIDA UROLOGIC RESEARCH ASSOCIATES, INC.

The undersigned, acting as Incorporator of a corporation under the Florida Business Corporation Act, adopts the following Articles of Incorporation for such corporation:

ARTICLE I

The name of the corporation is:

SOUTH FLORIDA UROLOGIC RESEARCH ASSOCIATES, INC.

ARTICLE II

The mailing address of the corporation is:

4302 Alton Road, Suite 910 Miami Beach, FL 33140

The address of the principal office is:

4302 Alton Road, Suite 910 Miami Beach, FL 33140

ARTICLE III

The duration of this corporation is to be perpetual.

ARTICLE IV

The corporation may engage in any activity or business permitted under the laws of the State of Florida.

ARTICLE V

The corporation shall have authority to issue 1,000 shares, all of one class, without par value.

ARTICLE VI

The address of the initial registered office is 4302 Alton Road, Suite 910 Miami Beach, FL 33140. The name of the corporation's registered agent at such address is Randy D. Makovsky, M.D., who upon accepting this designation agrees to comply with the provisions of Section 48.091, *Florida Statutes*, as amended from time to time, with respect to keeping an office open for service of process. The certificate and written

acceptance with respect to the registered office and registered agent appears at the conclusion of these Articles.

ARTICLE VII

The number of directors constituting the Board of Directors shall be fixed as provided by the bylaws, but shall not be fixed at less than one.

ARTICLE VIII

The number of directors constituting the initial board of directors is 1, whose name and address is:

Randy D. Makovsky, M.D. 4302 Alton Road, Suite 910 Miami Beach, FL 33140

ARTICLE IX

The name and address of the incorporator is:

Randy D. Makovsky, M.D. 4302 Alton Road, Suite 910 Miami Beach, FL 33140

ARTICLE X

This corporation shall indemnify and may insure its officers and directors to the fullest extent permitted by law.

ARTICLE XI

These Articles of Incorporation may be amended in the manner authorized by law at the time of amendment.

IN WITNESS WHEREOF, I, Randy D. Makovsky, M.D., being the Incorporator of this corporation, make and file these Articles of Incorporation this / '4 day of July, 1999.

RANDY D. MAKOVSKY, M.D., INCORPORATOR

CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN FLORIDA, AND NAMING AGENT UPON WHOM PROCESS MAY BE SERVED

IN COMPLIANCE WITH SECTION 48.091, AND CHAPTER 607, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED:

SOUTH FLORIDA UROLOGIC RESEARCH ASSOCIATES, INC., DESIRING TO ORGANIZE OR QUALIFY UNDER THE LAWS OF THE STATE OF FLORIDA, HAS APPOINTED RANDY D. MAKOVSKY, M.D., AN INDIVIDUAL WHO RESIDES IN THE STATE OF FLORIDA, AS ITS AGENT TO ACCEPT SERVICE OF PROCESS WITHIN FLORIDA. SOUTH FLORIDA UROLOGIC RESEARCH ASSOCIATES, INC.'S BUSINESS OFFICE IS IDENTICAL WITH THE REGISTERED OFFICE HEREUNDER FOR SERVICE OF PROCESS, AS FOLLOWS:

REGISTERED OFFICE AND REGISTERED AGENT:

Randy D. Makovsky, M.D. 4302 Alton Road, Suite 910 Miami Beach, FL 33140

RANDY D. MAKOVSKY, M.D., AS REGISTERED AGENT FOR SOUTH FLORIDA UROLOGIC RESEARCH ASSOCIATES, INC.

WRITTEN ACCEPTANCE BY AGENT

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE-STATED CORPORATION, AT THE REGISTERED OFFICE DESIGNATED IN THE CERTIFICATE SET FORTH ABOVE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND FURTHER STATE THAT I AM FAMILIAR WITH AND ACCEPT AND AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES AND THIS POSITION, INCLUDING THE PROVISIONS OF SECTION 48.091, FLORIDA STATUTES.

RANDY D. MAKÓVSKY, M.D., INCORPORATOR

STATE OF FLORIDA

) SS:

COUNTY OF MIAMI-DADE)

SWORN TO AND SUBSCRIBED before me this 14 day of July, 1999.

NOTARY PUBLIC, STATE OF FLORIDA My Commission Expires:

[NOTARIAL SEAL]

