

P99000100887

TRANSMITTAL LETTER

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

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-11/15/99--01131--002
*****78.75 *****78.75

Subject: WomanCare of Daytona Beach, Inc.

Enclosed are an original and one copy of the articles of incorporation and a check for \$78.75 for filing fee and Certificate of Status.

From:

Tammy Sobieski
1030 Herman Ave.
Orlando, FL. 32803
407-896-2233

FILED
1999 NOV 15 PM 3:04
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Corporation Act, hereby adopts the following Articles of Incorporation.

Article 1

The Name of the Corporation shall be: WomanCare of Daytona Beach, Inc.

Article 2

The principle place of business is:

WomanCare of Daytona Beach, Inc.
1225 Eighth St.
Daytona Beach, FL 32117

The mailing address of the Corporation is:

WomanCare of Daytona Beach, Inc.
1030 Herman Ave.
Orlando, FL 32803

Article 3

The corporation is authorized to issue one class of stock, that being 1000 shares of no par value, common stock, with identical rights and privileges, the transfer of which is restricted according to the bylaws of the corporation.

Article 4

The name and address of the initial registered agent is:

Tammy Sobieski
1030 Herman Ave
Orlando, FL 32803

Article 5

The name and address of the incorporator is:

Tammy Sobieski
1030 Herman Ave
Orlando, FL 32803

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TALLAHASSEE, FLORIDA

11-6-99
Date

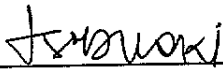
T Sobieski
Signature/Incorporator Tammy Sobieski

CERTIFICATE OF DESIGNATION
OF
REGISTERED OFFICE AND AGENT

FILED
1999 NOV 15 PM 3:04
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

WomanCare of Daytona Beach, Inc.
1030 Herman Ave
Orlando, FL 32803

Having been named as the 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 of registered agent

Date