

P99000101259

Laser Medical Arts, Inc.

19235 U.S. Highway 41 North
Lutz, FL 33549

800-226-5650
813-949-9658 (Fax)

VIA FEDERAL EXPRESS

November 15, 1999

Florida Secretary of State
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

EFFECTIVE DATE
11-10-99

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*****78.75 *****78.75

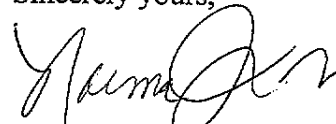
Re: Laser Medical Arts, Inc.

Dear Sir/Madam:

Please find enclosed the Articles of Incorporation for the above-referenced corporation for filing. Also enclosed is a check in the amount of \$78.75 in payment of the filing fee, registered fee and a certified copy of the Articles of Incorporation. Please return the certified copy to me at the above address.

Thank you for your cooperation in this matter. If you have any questions, please give me a call.

Sincerely yours,


Norma J. Meadows, CLA

enclosures

FILED
1999 NOV 16 PM 1:37
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

A. Howell NOV 18 1999

ARTICLES OF INCORPORATION

OF

LASER MEDICAL ARTS, INC.

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

EFFECTIVE DATE
11-10-99

ARTICLE I - NAME

The name of this corporation is Laser Medical Arts, Inc. (the "Corporation").

ARTICLE II - EFFECTIVE DATE/DURATION

The Corporation shall begin its existence on November 10, 1999 and it shall have perpetual existence.

ARTICLE III - PRINCIPAL OFFICE AND MAILING ADDRESS

The principal office and mailing address of this Corporation is 19235 U.S. Highway 41 North, Lutz, FL 33549.

ARTICLE IV - PURPOSE

This Corporation may engage in any activity or business permitted under the laws of the United States and the State of Florida.

ARTICLE V - CAPITAL STOCK

This Corporation is authorized to issue Ten Thousand (10,000) shares of One Dollar (\$1.00) par value common stock, which shall be designated "Common Shares."

ARTICLE VI - INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office of this Corporation is 19235 U.S. Highway 41 North, Lutz, FL 33549. The name of the initial registered agent at such address is Michael Glantz.

ARTICLE VII - INITIAL BOARD OF DIRECTORS

This Corporation shall have one (1) director initially. The number of directors may be increased or diminished from time to time in the manner provided in the By-Laws but shall never

be less than one (1). The name and address of the initial director of this Corporation is: Michael Glantz, 19235 U.S. Highway 41 North, Lutz, FL 33549.

<u>Name</u>	<u>Address</u>
Michael Glantz	19235 U.S. Highway 41 North Lutz, FL 33549

ARTICLE VIII - BY-LAWS

The initial By-Laws of this Corporation shall be adopted by the initial director of this Corporation.

ARTICLE IX - INDEMNIFICATION

This Corporation shall indemnify any officer or director, or any former officer or director, to the fullest extent permitted by applicable law.

ARTICLE X - INCORPORATOR

The name and address of the person signing these Articles of Incorporation is:

<u>Name</u>	<u>Address</u>
Michael Glantz	19235 U.S. Highway 41 North Lutz, FL 33549

ARTICLE XI - AMENDMENT

This Corporation reserves the right to amend or repeal any provisions contained in these Articles of Incorporation, in accordance with the provisions of the Florida Business Corporation Act, as amended from time to time.

IN WITNESS WHEREOF, the undersigned has executed these Articles of Incorporation, this _____ day of November 1999.



Michael Glantz, Incorporator

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ACCEPTANCE BY REGISTERED AGENT

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE FOREGOING CORPORATION, AT THE PLACE DESIGNATED IN ARTICLE VI OF THESE ARTICLES OF INCORPORATION, THE UNDERSIGNED HEREBY AGREES TO ACT IN THIS CAPACITY, AND FURTHER AGREES TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE DISCHARGE OF HIS DUTIES.

DATED THIS 15th DAY OF NOVEMBER 1999.


By: 

Michael Glantz
Registered Agent

STATE OF FLORIDA)

COUNTY OF HILLSBOROUGH)

The foregoing instrument was acknowledged before me this 15th day of November 1999 by Michael Glantz who, as Incorporator, executed the foregoing Articles of Incorporation, who is personally known to me ~~or who has produced~~ _____ as identification and who did/did not take an oath on behalf of the corporation.


NOTARY PUBLIC, STATE OF FLORIDA

My commission expires:

