

TRANSMITTAL LETTER

P020000054161

FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

02 MAY 13 AM 10:31

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

SUBJECT: CIA ANESTHESIA INC.  
(Proposed corporate name - must include suffix)

400005507114--2  
-05/13/02--01093--015  
\*\*\*\*\*70.00 \*\*\*\*\*70.00

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

\$70.00  
Filing Fee

\$78.75  
Filing Fee  
& Certificate

\$122.50  
Filing Fee  
& Certified Copy

\$131.25  
Filing Fee,  
Certified Copy  
& Certificate

ADDITIONAL COPY REQUIRED

FROM: JOSEPH CURRAM  
Name (Printed or typed)

5920 RIVERSIDE DRIVE  
Address

MELBOURNE BEACH, FL, 32951-3740  
City, State & Zip

321-952-8869  
Daytime Telephone number

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

546 (2)

ARTICLES OF INCORPORATION

02 MAY 13 AM 10:31

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:

C. A. ANESTHESIA INC.

ARTICLE II PRINCIPAL OFFICE

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

5920 RIVERSIDE DRIVE, MELBOURNE BEACH, FL  
32951

ARTICLE III SHARES

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

100

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

JOSEPH CURRAN, 5920 RIVERSIDE DRIVE

ARTICLE V INCORPORATOR

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

JOSEPH CURRAN, 5920 RIVERSIDE DRIVE, MELBOURNE BEACH FL,  
32951

Joseph Curran  
Signature/Incorporator

4-29-02  
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

Joseph Curran  
Signature/Registered Agent

4-29-02  
Date