Filing and License Fee:	\$230.00 minimum	ID Numbe
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STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State Corporations Division 148 W. River Street Providence, Rhode Island 02904-2615

PROFESSIONAL SERVICE CORPORATION

ARTICLES OF INCORPORATION

The undersigned acting as incorporator(s) of a professional service corporation under Chapters 7	-5.1 and 3 -1.2 of the
General Laws of Rhode Island, 1956, as amended, adopt(s) the following Articles of Incorporation fo	r such corporation: 🛫

				owing Ar	icles of Incorporation for such corporation:
1.	The name of the corporation is Pinetree E	ndoscopy, inc	C.	<u>-</u> -	
	(This is a close corporation pursuant to	. § 7-1.2-1701 of tl	ne Gene	ral Laws, 1	956; as amended.) -(Strike if inapplicable.)
2.	The profession to be practiced through the	professional s	ervice	corporation	on is medical
3.	The total number of shares which the corpo	oration has autl	hority 1	o issue is	:
	(a) If only one class: Total number of shares	8,000			
			<u>or</u>		ϵ_{p}
	limitations, or restrictions of them, which are per respect of any class or classes of shares of the	d the powers, promitted by the pro corporation and	referen ovisions d the fix	of Chapte ing of whi	ghts, including voting rights, and the qualifications, or 7-1.2 of the General Laws, 1956, as amended, in the children of the articles of association is desired, and an rectors to fix by vote or votes any of them that may
4.	The address of the initial registered office of	of the corporation	on is	Nixon P	eabody LLP, One Citizens Plaza, Ste. 500 (Street Address, not P.O. Box)
	Providence	, Ri _ <u>(</u>	02903		and the name of its initial registered agent
	(City/Town) at such address is Stephen D. Zubiago, I	Esquire	(Zip	Code)	·
	(Name	or Agent)			

- 5. The corporation shall have perpetual existence until dissolved or terminated in accordance with Chapter 7-1.2.
- 6. Unless otherwise stated all authorized shares are deemed to have a nominal or par value of \$0.01 per share.

Form No. 112 Revised 12/05

See exhibit A attached hereto.	
	44.4
	- 14/4F
The name and address of each incorpora	ator is:
The name and address of each incorpora	ator is:
<u>Name</u>	
<u>Name</u>	<u>Address</u>
<u>Name</u>	<u>Address</u>
<u>Name</u>	<u>Address</u>
Stephen D. Zubiago, Esquire Nixon F	Address Peabody LLP, One Citizens Plaza, Ste. 500, Providence, RI 02905
<u>Name</u> Stephen D. Zubiago, Esquire Nixon F	Address Peabody LLP, One Citizens Plaza, Ste. 500, Providence, RI 02905 effective upon filing unless a specified date is provided which shall be no late
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Name Stephen D. Zubiago, Esquire Nixon F These Articles of Incorporation shall be e	Address Peabody LLP, One Citizens Plaza, Ste. 500, Providence, RI 02905 Effective upon filing unless a specified date is provided which shall be no late upon filing. Under penalty of perjury, I/we declare and affirm that I/we hav
Name Stephen D. Zubiago, Esquire Nixon F These Articles of Incorporation shall be e	Address Peabody LLP, One Citizens Plaza, Ste. 500, Providence, RI 02905 Iffective upon filing unless a specified date is provided which shall be no late upon filing. Under penalty of perjury, I/we declare and affirm that I/we have examined these Articles of Incorporation, including an accompanying attachments, and that all statements contained
Name Stephen D. Zubiago, Esquire Nixon F These Articles of Incorporation shall be e than the 90 th day after the date of this filing	Address Peabody LLP, One Citizens Plaza, Ste. 500, Providence, RI 02905 Effective upon filing unless a specified date is provided which shall be no late upon filing. Under penalty of perjury, I/we declare and affirm that I/we have examined these Articles of Incorporation, including an
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EXHIBIT A

To Articles of Incorporation of Pinetree Endoscopy, Inc.

Article SIXTH: No director of the Corporation shall be liable to the Corporation or to its stockholders for monetary damages for breach of the director's duty as a director; provided, however, that this Article SIXTH shall not eliminate or limit the liability of a director: (i) for any breach of the director's duty of loyalty to the Corporation or its stockholders; (ii) for acts or omissions not in good faith or which involve intentional misconduct or a knowing violation of law; (iii) the liability imposed pursuant to the provisions of Rhode Island Business Corporation Act, Sec. 7-1.2-811 (as in effect or as hereafter amended); or (iv) for any transaction from which the director derived an improper personal benefit unless said transaction is permitted by the Rhode Island Business Corporation Act, Sec. 7-1.2-807 (as in effect or as hereafter amended). If the Rhode Island General laws are amended after the adoption of this Article SIXTH to authorize corporate action further eliminating or limiting the personal liability of directors, then the liability of each director of the Corporation shall be eliminated or limited to the fullest extent permitted by the Rhode Island General Laws, as so amended. Neither the amendment nor repeal of this Article SIXTH nor the adopting of any provision of these Articles of Incorporation inconsistent with this Article SIXTH shall eliminate or reduce the effect of this Article SIXTH in respect of any matter occurring, or any cause of action, suit or claim that, but for this Article SIXTH, would occur or arise, prior to such amendment, repeal or adoption of an inconsistent provision.

UNIVEGAS ACORD. CERTIFICATE OF LIABILITY INSURANCE DATE (MM/DD/YYYY) 06/18/09 THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR Starkweather & Shepley ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. PO Box 549 Providence, RI 02901-0549 NAIC # INSURERS AFFORDING COVERAGE 401 435-3600 25674 INSURER A Travelers Insurance Company INSURED Pinetree Endoscopy, Inc. INSURER B 33 Staniford Street INSURER C Providence, RI 02905 INSURER D: INSURER E: COVERAGES THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES, AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS. POLICY EFFECTIVE POLICY EXPIRATION DATE (MM/DD/YY) NSR ADD'L LTR INSRE POLICY NUMBER TYPE OF INSURANCE EACH OCCURRENCE \$1,000,000 06/01/09 06/01/10 680811W6935PHX GENERAL LIABILITY DAMAGE TO RENTED PREMISES (Ea occurrence) \$300,000 X COMMERCIAL GENERAL LIABILITY MED EXP (Any one person) \$5,000 CLAIMS MADE | X OCCUR \$1,000,000 PERSONAL & ADV INJURY GENERAL AGGREGATE \$2,000,000 PRODUCTS - COMP/OP AGG \$2,000,000 GEN'L AGGREGATE LIMIT APPLIES PER PRO-JECT POLICY COMBINED SINGLE LIMIT (Ea accident) AUTOMOBILE LIABILITY ANY AUTO ALL OWNED AUTOS BODILY INJURY (Per person) SCHEDULED AUTOS HIRED AUTOS BODILY INJURY (Per accident) NON-OWNED AUTOS PROPERTY DAMAGE (Per accident) AUTO ONLY - EA ACCIDENT GARAGE LIABILITY EA ACC ANY AUTO OTHER THAN AUTO ONLY: AGG EACH OCCURRENCE EXCESS/UMBRELLA LIABILITY AGGREGATE OCCUR CLAIMS MADE DEDUCTIBLE \$ RETENTION WC STATU-TORY LIMITS WORKERS COMPENSATION AND EMPLOYERS' LIABILITY E.L. EACH ACCIDENT ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? E.L. DISEASE - EA EMPLOYEE lf yes, describe under SPECIAL PROVISIONS below E.L. DISEASE - POLICY LIMIT OTHER DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS CANCELLATION CERTIFICATE HOLDER SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL __30* DAYS WRITTEN University Gastroenterology,Inc. NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL 33 Staniford Street IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR Providence, RI 02905 REPRESENTATIVES. AUTHORIZED REPRESENTATIVE



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

I, A. RALPH MOLLIS, Secretary of State of the State of Rhode Island and Providence Plantations, hereby certify that this document, duly executed in accordance with the provisions of Title 7 of the General Laws of Rhode Island, as amended, has been filed in this office on this day:

A. RALPH MOLLIS

A. Japa 1. eeio

Secretary of State

