Filing and License Fee: \$230.00 minimum

ID Number: 16044



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

		ARŢĮ	CLES OF I	NCORPOR	RATION		
Th Ge	ne undersigned actin	g as incorporator(s) of e Island, 1956, as amer	a profession nded, adopt(s	al service co the following	rporation under Chapters 7-5.1 a g Articles of Incorporation for such	nd 7-1.	2 of the ation:
1.	The name of the co	rporation is Partners in	n Obstetrics	and Gyneco	logy, Inc.		
	(This is a	close corporation pursuant to	o § 7-1.2-1701 of	the General Lav	ws, 1956, as amended.) (Strike if inapplica	ble.)	
2.	The profession to b	e practiced through the	professional	service corpo	oration is <u>obstetrics and gyneco</u>	logy	
3.	The total number of	shares which the corpo	oration has au	ıthority to issi	ue is:		
	(a) If only one class:	Total number of shares	10,000 sha	res of comm	on stock, \$0.01 par value		
				<u>or</u>			
	limitations, or restriction respect of any class of express grant of the a	ons of them, which are per or classes of shares of the	mitted by the percentage comporation a	rovisions of Cl nd the fixing o	nd rights, including voting rights, and hapter 7-1.2 of the General Laws, 1956 f which by the articles of association is of directors to fix by vote or votes any	5, as am s desired	ended, in d, and an
	See Exhibit A atta	ched hereto and made	a part here	of.		<u> </u>	<i>&!:</i> :
4.	The address of the	initial registered office of	of the corpora	tion is _180	South Main Street (Street Address, <u>not</u> P.O. Box)	2006 ONC	- 655 - 655 - 655 - 655 - 655
	Providence		, RI	02903	and the name of its initial re	egistere	d agent
		(City/Town)		(Zip Code		_	25
	at such address is	Brian J. Spero (Name	of Agent)		·	AM 11: 22	STATE STATE
5.	The corporation st	nall have perpetual exist	tence until dis	solved or ter	minated in accordance with Chapt	er 7-1.2	

6. Unless otherwise stated all authorized shares are deemed to have a nominal or par value of \$0.01 per share.

FILED DEC 19 2006

Form No. 112 Revised 12/05

See Exhibit B attached hereto and	made a part hereof.						
The name and address of each incorporator is:							
. The name and address of each inco	orporator is:						
The name and address of each inco <u>Name</u> Brian J. Spero, Esq.	orporator is: <u>Address</u> 180 South Main Street, Providence, RI 02903						
<u>Name</u>	<u>Address</u>						
<u>Name</u>	<u>Address</u>						
<u>Name</u>	<u>Address</u>						
Name Brian J. Spero, Esq. These Articles of Incorporation shall	Address 180 South Main Street, Providence, RI 02903 Il be effective upon filing unless a specified date is provided which shall be no						
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Name Brian J. Spero, Esq. These Articles of Incorporation shal than the 90 th day after the date of the content of the conte	Address 180 South Main Street, Providence, RI 02903 Il be effective upon filing unless a specified date is provided which shall be no nis filing Upon filing Under penalty of perjury, I/we declare and affirm that I/we lexamined these / Articles of Incorporation, including						
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EXHIBIT A

The board of directors, acting without the shareholders, may (a) reclassify any unissued shares of any authorized class or series into one or more existing or new classes or series, and (b) create one or more new classes or series of shares, specifying the number of shares to be included therein, the distinguishing designation thereof and the preferences, limitations and relative rights applicable thereto, provided that the board of directors may not approve an aggregate number of authorized shares of all classes and series which exceeds the total number of authorized shares specified in the Articles of Incorporation approved by the shareholders.

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EXHIBIT B

- 1. No director shall have personal liability to the corporation or to its shareholders for monetary damages for breach of such director's duty as a director provided that this provision shall not eliminate or limit the liability of such director: (i) for any breach of the director's duty of loyalty to the corporation or to its shareholders; (ii) for acts or omissions not in good faith or which involve intentional misconduct or a knowing violation of law; (iii) under Section 7-1.2-811 of the Rhode Island Business Corporation Act; or (iv) for any transaction from which the director derived an improper personal benefit (unless such transaction is permitted by Section 7-1.2-807 of the Rhode Island Business Corporation Act).
- 2. The corporation may provide, either in the corporation's bylaws or by contract, for the indemnification of directors, officers, employees and agents, by whomever elected or appointed, to the full extent presently permitted by law; provided, however, that if the applicable law is hereafter modified to permit indemnification in situations where it was not theretofor permitted, then such indemnifications may be permitted to the full extent permitted by such law as amended.
- 3. Any action required or permitted to be taken at a meeting of shareholders may be taken without a meeting if all the shareholders entitled to vote on the action consent to the action in writing.
- 4. The stock of the corporation is subject to transfer restrictions contained in its bylaws and copies thereof are on file at the registered office of the corporation. Certificates of stock of the corporation are transferable only upon compliance with the provisions of said transfer restrictions.
- The shareholders of the corporation shall be entitled to a pre-emptive mirty (30) days following the nation of 5. right, for a period of thirty (30) days following the notice referred to below, to subscribe for purchase or otherwise acquire, in the proportions which their holdings of the shares of common stock of the corporation bear to all of the issued and outstanding shares of common stock of the corporation, (i) any shares of the same class of the corporation, any equity shares and/or and voting shares of any class of the corporation which the corporation proposes to issue, or (it any rights or options which the corporation proposes to grant (a) for the purchase of shares of the same class of the corporation, any equity shares and/or any voting shares of any class of the corporation, or (b) for the purchase of any shares, bonds, securities or obligations of the corporation which are convertible into, or exchangeable for, or which carry any rights to subscribe for, purchase or otherwise acquire shares of the same class of the corporation, any equity shares and/or any voting shares of any class of the corporation, whether now or hereafter authorized or created, whether having unissued or treasury status, and whether the proposed issue, reissue, transfer or grant is for cash, property or any other lawful consideration. The pre-emptive right granted herein shall be deemed waived by any shareholder who does not so exercise it and pay for shares, rights, options, bonds, securities or obligations within thirty (30) days after receipt of notice in writing from the corporation stating the price, terms and conditions of the offering. After the expiration of such thirty (30) day period, any and all of such shares, rights, options, bonds, securities or obligations of the corporation may be issued,

reissued, transferred or granted by the corporation, as the case may be, to such persons, firms, corporations and associations, and for such lawful consideration, and on such terms as the corporation in its discretion may determine. As used herein, the terms "equity shares" and "voting shares" shall mean, respectively, shares which confer unlimited dividend rights and shares which confer unlimited voting rights.

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WOMEN & INFANTS HOSPITAL OF RHODE ISLAND A CARE NEW ENGLAND HOSPITAL 101 DUDLEY STREET PROVIDENCE RHODE ISLAND 02905-2459

401-274-1100 FAX: 401-453-1666

AFFILIATED WITH SROWN MEDICAL SCHOOL

Women&Infants'

WOMEN & INFANTS' HOSPITAL OF RHODE ISLAND INDEMNIFICATION PROGRAM VERIFICATION OF COVERAGE

NAME OF INSURED:

Partners in Obstetrics & Gynecology

TYPE OF COVERAGE: PROFESSIONAL LIABILITY

CLASS:

POLICY NUMBER: WIH/084

POLICY TYPE: CLAIMS MADE

EFFECTIVE DATE:

7/1/2006

EXPIRATION DATE:

6/30/2007

LIMITS OF

LIABILITY:

\$1,000,000/\$3,000,000

Shared Limits

This is to certify that the above mentioned is covered for professional liability claims under the Women & Infants Hospital Indemnification Program.

NAME AND ADDRESS OF PARTY TO WHOM VERIFICATION IS ISSUED:

Rhode Island Office of the Secretary of State

82 Smith Street Providence, RI 02903

Nicholas Driscoll

December 18, 2006

Authorized Representative

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