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Certified Copies	_ Certificates	of Status
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12/23/03--01037--009 **78.75

TRANSMITTAL LETTER

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

SUBJECT: Jerome S. Reich, M.D., P.A..

Enclosed is the original and one copy of the articles of incorporation and a check for:

\$78.75 Filing Fee & Certificate of Status

From:

Jerome S. Reich, M.D.

Lelo-

16800 NW 2nd Avenue, Suite 504

Miami, FL 33169 305-652-9652

Date

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, ES. (Profit)

ARTICLE I NAME

The name of the Corporation shall be Jerome S. Reich, M.D., P.A.

ARTICLE II PRINCIPAL OFFICE

The principal office shall be 16800 NW 2nd Avenue, Suite 504, Miami, FL 331692

ARTICLE III PURPOSE

The purpose of this Corporation is for the practice of medicine (physician's office), and/or any activities or business permitted under the laws of the United States and Florida.

ARTICLE IV SHARES

The maximum number of shares which this Corporation is authorized to have outstanding at any time is One Thousand (1,000) shares of common stock.

ARTICLE V INITIAL OFFICERS/DIRECTORS

Jerome S. Reich (President)(Secretary) 16800 NW 2nd Avenue, Suite 504 Miami, FL 33169 Director, President and Secretary

ARTICLE VI REGISTERED AGENT

Jerome S. Reich, 16800 NW 2nd Avenue, Suite 504, Miami, FL 11369

ARTICLE VII INCORPORATOR

Jerome S. Reich, 16800 NW 2nd Avenue, Suite 504, Miami, FL 11369

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Signature/Registered Agent

Date

Date

Signature/Incorporator