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(Requestor's Name)

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(Address)

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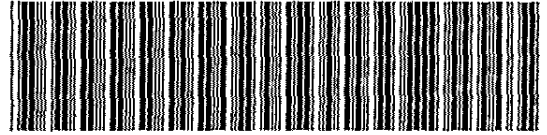
(Business Entity Name)

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**TRANSMITTAL LETTER**

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

Subject SONIA SIBAJA, M.D., CORP.

Enclosed is an original and two (2) copies of the articles of incorporation and a check for

\$70.00  
Filing Fee

\$78.75  
Filing Fee  
& Certified Copy

\$78.75  
Filing Fee  
& Certified Copy

\$87.50  
Filing Fee,  
Certified Copy  
& Certificate

**(ADDITIONAL COPY REQUIRED)**

FROM: Nellie Akalp  
Name

30141 Agoura Rd., Suite 205,  
Address

Agoura Hills, California 91301  
City, State & Zip

818-879-9079  
Daytime Telephone number

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SECRET  
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NOTE: Please provide the original and one copy of the articles. Provide TWO copies if you have requested a certified copy as designated in the boxes above.

ARTICLES OF INCORPORATION  
OF  
SONIA SIBAJA, M.D., CORP.

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: SONIA SIBAJA, M.D., CORP.

ARTICLE II PRINCIPAL OFFICE

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

1120 N.W. 129 Court  
Miami-Dade, Florida 33182

ARTICLE III SHARES

The number of shares that this corporation is authorized to have outstanding at any one time is: 1,500 at \$0.01 par value per share.

ARTICLE IV INITIAL DIRECTORS

The name(s) and address(s) of the initial Director(s) is/are:

Sonia Sibaja, M.D.  
1120 N.W. 129 Court  
Miami, Florida 33182

ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Sonia Sibaja  
1120 N.W. 129 Court  
Miami, Florida 33182

ARTICLE VI INCORPORATOR

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

Nellie Akalp  
30141 Agoura Rd., Suite 205  
Agoura Hills, California 91301

Nellie Akalp  
Nellie Akalp, Incorporator

8-10-04  
Date

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.

Sonia Sibaja  
Sonia Sibaja, Registered Agent

8-20-04  
Date

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SECRETARY OF STATE