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TRANSMITTAL LETTER

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

SUBJECT: JOSE LUIS RUIZ M.D. P.A (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX) Enclosed are an original and one (1) copy of the articles of incorporation and a check for: \$70.00 **3** \$78.75 \$87.50 \$78.75 Filing Fee Filing Fee Filing Fee Filing Fee, & Certificate of Status & Certified Copy Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED FROM: JOSE LUIS RUIZ M.D.

Name (Printed or typed)

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

Daytime Telephone number

ARTICLES OF INCORPORATION

OF

JOSE LUIS RUIZ M.D. P.A.

ARTICLE I CORPORATE NAME

The name of this Corporation is: JOSE LUIS RUIZ M.D. P.A.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address is: 11648 Quail Roost Dr., Miami, Florida 33157

ARTICLE III PURPOSE

The purpose for which the Corporation is organized is to provide medical services in the field of Family Practice to the community. The Corporation shall also engage in any and all businesses permitted under the laws of the State of Florida.

ARTICLE IV

The maximum number of shares of stock that this Corporation is authorized to issue and have outstanding at any one time is (500) shares of common stock having a par value of \$ 1.00 per share.

ARTICLE V BOARD OF DIRECTORS

This Corporation shall have one Director initially. The number of of Directors may be increased or diminished from time to time by the Bylaws adopted by the Stockholders, but, shall never be less than one. The name of the initial Director of this Corporation and his street address is:

NAME

ADDRESS

JOSE LUIS RUIZ M.D.

777 E. 25th St. #30+ HILLERH, FL. 33013

ARTICLE VI REGISTERED AGENT

The Registered Agent and the street address of the initial Registered Office of this Corporation in the State of Florida shall be: Jose Luis Ruiz M.D., 11648 Quail Roost Dr., Miami, Florida 33157. The Board of Directors from time to time may move the Registered Office to any other address in the State of Florida.

ARTICLE VII- INCORPORATOR

The name and street address of the person signing this Articles of Incorporation as the Incorporator is:

NAME

ADDRESS

JOSE LUIS RUIZ M.D.

11648 Quail Roost Dr., Miami, Florida 33157

ARTICLE- VIII AMENDMENT

These Articles of Incorporation may be amended in the manner provided by law. Every amendment shall be approved by the Board of Directors proposed by them to the stockholders and approved at a stockholder's meeting by at least a majority of the stockholders entitled to vote, unless all of the Directors and all of the stockholders sign a written statement manifesting their intention that a certain amendment of these Articles of Incorporation be made.

IN WITNESS WHEREOF, the undersigned, as Incorporator, have executed the foregoing Articles of Incorporation on this | day of | DNEWDER, 2001.

JOSE LUIS RUIZ M.D.

JOSE LUIS RUIZ M.D. P.A. CORP.

ACKNOWLEDGEMENT OF REGISTERED AGENT

Having been named to accept service for the above stated Corporation at place designated in this Certificate, I hereby accept to act in this capacity, and agree to comply with the provision of said Act relative to keeping open said office.

JOSE LUIS RUIZ M.D.

STATE OF FLORIDA)

COUNTY OF MIAMI-DADE)

SWORN TO AND SUBSCRIBED before me on this | day of November, 2004

Cerstina Vanora

CXD 8/10107

CRISTINA VARONA
NOTARY PUBLIC - STATE OF FLORIDA
COMMISSION # DD237811
EXPIRES 8/16/2007
BONDED THRU 1-588-NOTARY1

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