

# P130000006695

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**FLORIDA PROFIT/NON PROFIT CORPORATION  
PALM SPRING MEDICAL CARE OF HIALEAH, INC**

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## ARTICLES OF INCORPORATION

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

The undersigned Incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I - NAME

The name of the corporation shall be:

*Palm Spring Medical Care of Hialeah, Inc.*

ARTICLE II - PRINCIPAL OFFICE

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

*1140 West 50 PL Ste 205  
Hialeah Florida 33012.*

ARTICLE III - SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

*5000*

ARTICLES IV - INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

*Maria C. Fernandez MD.  
4675 W 18 St #811  
Hialeah FL 33012.*

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDAARTICLE V - INCORPORATOR

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

Maria C. Fernández  
4675 W 18 CT #811  
Hialeah FL 33012.

The undersigned incorporator has executed these Articles of Incorporation this

16 day of January, 2013.

Signature

ARTICLE VI - DIRECTOR (S)The name(s) and street address (es) of the director(s) to these Articles of  
Incorporation is (are):

Maria C. Fernández MD. (President)  
4675 W 18 CT #811  
Hialeah FL, 33012.

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

Having been named as Registered Agent and to accept service of process for the above stated corporation at 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 related to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as Registered Agent.

Registered Agent Signature

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