

P 9 6 0 0 0 0 7 3 1 7 5

CAPITAL CONNECTION, INC.

417 E. Virginia St., Suite 1, Tallahassee, FL 32301, (904)224-8870
 Mailing Address: Post Office Box 10349, Tallahassee, FL 32302
 TOLL FREE No. 1-800-342-8062
 FAX (904) 222-1222

NAME _____
 FIRM _____
 ADDRESS _____

PHONE () _____

Service: Top Priority _____ Regular _____
 One Day Service Two Day Service

To us via _____ Return via _____

Matter No.: _____ Express Mail No. _____

State Fee \$ _____ Our \$ _____

TV!

RE: Arturo Corcos M.D.
P.A.

	G.C. FEE.	DISBURSED
<input checked="" type="checkbox"/> Capital Express™	_____	_____
<input checked="" type="checkbox"/> Art. of Inc. File	_____	_____
<input type="checkbox"/> Corp. Record Search	_____	_____
<input type="checkbox"/> Ltd. Partnership File	_____	_____
<input type="checkbox"/> Foreign Corp. File	_____	_____
<input checked="" type="checkbox"/> () Cert. Copy(s)	_____	_____
<input type="checkbox"/> Art. of Amend. File	_____	_____
<input type="checkbox"/> Dissolution/Withdrawal	_____	_____
<input type="checkbox"/> C U S -	_____	_____
<input type="checkbox"/> Fictitious Name File	_____	_____
<input type="checkbox"/> Name Reservation	_____	_____
<input type="checkbox"/> Annual Report/Reinstatement	_____	_____
<input type="checkbox"/> Reg. Agent Service	_____	_____
<input type="checkbox"/> Document Filing	_____	_____
<input type="checkbox"/> Corporate Kit	_____	_____
<input type="checkbox"/> Vehicle Search	_____	_____
<input type="checkbox"/> Driving Record	_____	_____
<input type="checkbox"/> Document Retrieval	_____	_____
<input type="checkbox"/> UCC 1 or 3 File	_____	_____
<input type="checkbox"/> UCC 11 Search	_____	_____
<input type="checkbox"/> UCC 11 Retrieval	_____	_____
<input type="checkbox"/> File No.'s, _____ Copies	_____	_____
<input type="checkbox"/> Courier Service	_____	_____
<input type="checkbox"/> Shipping/Handling	_____	_____
<input type="checkbox"/> Phone ()	_____	_____
<input type="checkbox"/> Top Priority	_____	_____
<input type="checkbox"/> Express Mail Prep.	_____	_____
<input type="checkbox"/> FAX () pgs.	_____	_____

000001338145
 -09/04796-01077-023
 *****357.50 *****122.50

SUBTOTALS

FEE.....	_____
DISBURSED.....	_____
SURCHARGE.....	_____
TAX on corporate supplies.....	_____
SUBTOTAL.....	_____
PREPAID.....	_____
BALANCE DUE.....	_____
_____	_____

RECEIVED
 96 SEP -4 AM 10 41
 DIVISION OF CONSUMER PROTECTION

REQUEST TAKEN CONFIRMED APPROVED

DATE _____

TIME _____ CK No. _____

BY [Signature] _____

WALK-IN Will Pick Up 8/4 12:00

Please remit invoice number with payment
 TERMS: NET 10 DAYS FROM INVOICE DATE
 1 1/2% per month on Past Due Amounts
 Past 30 Days, 18% per Annum.

THANK YOU
 from
 Your Capital Connection

**ARTICLES OF INCORPORATION
OF
ARTURO CORCES M.D., P.A.**

The undersigned subscriber to these Articles of Incorporation hereby forms a corporation under the Florida Professional Service Corporation and Limited Liability Company Act.

ARTICLE I.

CORPORATE NAME

The name of this Corporation is:

ARTURO CORCES M.D., P.A.

ARTICLE II.

MAILING ADDRESS AND PRINCIPAL OFFICE

The Corporation's mailing address and principal office is c/o Abbey L. Kaplan, Esquire, Kluger, Peretz, Kaplan & Berlin, P.A., 1970 Miami Center, 201 South Biscayne Boulevard, Miami, Florida 33131.

ARTICLE III.

NATURE OF CORPORATE BUSINESS

This Corporation, through its Officers and Employees, shall be authorized to engage in every aspect and phase of the practice of medicine within the State of Florida; to engage in any activities that will facilitate and promote the practice of medicine through its Officers and Employees; and to invest and reinvest its funds in real estate, mortgages, stocks, bonds and any other type of investments and to purchase and own real and personal property necessary for the rendering of professional services within the practice of medicine; and to do every other act incidental to the corporate purpose that is permitted by law.

ARTICLE IV.

CAPITAL STOCK

This Corporation is authorized to issue a maximum of one thousand (1,000) shares of stock. The shares of stock authorized shall be common stock having a par value of One (1) Dollar per share.

ARTICLE V.

INITIAL REGISTERED AGENT AND INITIAL REGISTERED OFFICE

The Corporation's initial Registered Agent and Registered Office in the State of Florida shall be:

Abbey L. Kaplan, Esquire
KLUGER, PERETZ, KAPLAN & BERLIN, P.A.
1970 Miami Center
201 South Biscayne Boulevard
Miami, FL 33131

ARTICLE VI.

BOARD OF DIRECTORS

The Corporation shall have no less than one (1) Director at any time. The number of Directors may be altered from time to time by By-Laws adopted by the Stockholders.

The name and post office address of the initial Director of the Corporation is:

<u>Name</u>	<u>Address</u>
ARTURO CORCES	Abbey L. Kaplan, Esq. c/o Kluger, Peretz, Kaplan & Berlin, P.A. 1970 Miami Center 201 South Biscayne Boulevard Miami, FL 33131

The initial Director shall hold office until the first annual meeting of the Stockholders of the Corporation.

ARTICLE VII.

INCORPORATOR

The name and post office address of the Incorporator executing these Articles of Incorporation is as follows:

<u>Incorporator</u>	<u>Address</u>
RONNY J. HALPERIN	Kluger, Peretz, Kaplan & Berlin, P.A. 1970 Miami Center 201 South Biscayne Boulevard Miami, FL 33131

ARTICLE VIII.

**INCORPORATION OF PROVISIONS OF
PROFESSIONAL SERVICE CORPORATION ACT**

This Corporation is intended to be a Professional Corporation within the meaning of the Professional Service Corporation and Limited Liability Company Act, and accordingly, the Corporation, its Officers, Directors and Stockholders, shall be subject to all of the Sections of said Act concerning the formation of the Corporation, the conduct of its business, and the liabilities, rights, privileges and immunities of the Corporation, its Officers, Directors and Stockholders, as stated in Chapter 621, Florida Statutes.

THE UNDERSIGNED Incorporator, for the purpose of forming a Corporation to do business within the State of Florida, does make and file these Articles of Incorporation, hereby declaring and certifying that the facts stated are true.



RONNY J. HALPERIN

CERTIFICATE OF REGISTERED AGENT

OF

ARTURO CORCES M.D., P.A.

Pursuant to Section 607.0501 of the Florida Business Corporations Act, the following is submitted, in compliance with said Act:

That Arturo Corces M.D., P.A., desiring to organize under the laws of the State of Florida with its principal office, as indicated in the Articles of Corporation, has named Abbey L. Kaplan, Esquire, located at 1970 Miami Center, 201 So. Biscayne Blvd., Miami, Florida 33131, County of Dade, State of Florida, as its agent to accept service of process within this State.

ACKNOWLEDGMENT

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

Dated this 3 day of September, 1996.


Abbey L. Kaplan