Department of State Division of Corporation 2. Box 27 Tallahassee, FL 32314

SUBJECT:	1 6 1001 1 7 1 7		M.D., PA.	_
	(Proposed corpor	ate name - must include suff	ninaana 10	-01105008
Enclosed is an origina	al and one(1) copy of the article	es of incorporation and a	check for:	
☐ \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED	
FROM:	Melanie Ru Name (Pr	SEMBLETT MO inted or typed)		
	1125 Bel Ai	Y Brive	TALL:	8
	Highland Be	ou, FL 33 State & Zip	3487 ASSE	JAN 18
	561 278 Daytime To	2317 elephone number	FLORIE	R D 20 0

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

CK 350

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under Business Corporation Act, hereby adopts the following Articles of Incorporation	
ARTICLE I NAME	
The name of the corporation shall be:	JAN 18 P
Melanie Rosenblatt, M.D., P.A. PURPOSE: TO PROVIDE MEDICAL SERVICES	JAN 18 PM 12: 00 LANASSEE, FLORIDA LANASSEE, FLORIDA
ARTICLE II PRINCIPAL OFFICE	
The principal place of business and mailing address of this corporation	shall be:
1125 Bel Air Drive	
Highland Beach FL 33487	
ARTICLE III SHARES	**************************************
The number of shares of stock that this corporation is authorized to have	ve outstanding at any one time is:
(000)	
ARTICLE IV INITIAL REGISTERED AGENT AND ST The name and Florida street address of the initial registered agent are: 1125 Bel Air Brive Melanie R. Highland Beach, FL 33487	
ARTICLE V INCORPORATOR	anotion area
The <u>name and address</u> of the incorporator to these Articles of Incorporator	oradon are.
Melanie Rosenblatt, MD	
1125 Bel AV Brive	
Ulighland Black PL 33487	/ .
1125 Bel Air Drive Highland Black FL 33487 Mulli Dewletten	1/14/00
Mulling / Survey 100	Dota
Signature/Incorporator	Date
(An additional article must be added if an effecti	
Having been named as registered agent and to accept service of process for the all this certificate, I hereby accept the appointment as registered agent and agree to a the provisions of all statutes relating to the proper and complete performance of	act in this capacity. I further agree to comply with
obligations of my position as registered agent	1/11/10
Melanil Soubletynes	1/17/00 Poto
Signature/Registered Agent	Date