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TRANSMITTAL LETTER

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

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00 MAY -8 PM 1:05
RECEIVED DE STATE
TALLAHASSEE, FLORIDA

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-05/08/00--01135--009

*****87.50 *****87.50

SUBJECT:

Confidential Surgery Coordinators, Inc.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

☐ \$70.00
Filing Fee

☐ \$78.75
Filing Fee
& Certificate of Status

☐ \$78.75
Filing Fee
& Certified Copy

☒ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM:

Susan D. Maurer

Name (Printed or typed)

2613 Toledo Street

Address

Oral Gables, FL 33134

City, State & Zip

305-667-6697

Daytime Telephone number

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

D. BROWN MAY 1 1 2000

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

Confidential Surgery Coordinators, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

2613 Toledo St
Coral Gables FL 33134

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To help local and international patients seeking surgery in the US, by providing detailed information regarding the procedures available; scheduling and confirming their appointments; performing pre-op labs and counseling; providing nursing/aftercare and helping arrange travel & lodging

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

Eileen Diamond, President & Secretary
Susan D. Maurer, Vice President & Treasurer

ARTICLE VI REGISTERED AGENT

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

Eileen Diamond
5795 SW 50th Terrace
Miami, FL 33155

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Susan D. Maurer
2613 Toledo St
Coral Gables, FL 33134

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Eileen Diamond
Signature/Registered Agent

5/2/00
Date

Susan D. Maurer
Signature/Incorporator

5/2/00
Date