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Florida Department of State
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To: Division of Corporations
Fax Number : (850) 922-4001

From: Account Name : ACE INDUSTRIES, INC.
Account Number : 070744001530
Phone : (305) 358-2571
Fax Number : (305) 358-7832

FLORIDA PROFIT CORPORATION OR P.A.

SUNNY ISLES MEDICAL CENTER INC.

Certificate of Status	0
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B. McKnight JUN 28 2000

H00-34290

Articles of Incorporation

Article 1: Name of Corporation: **SUNNY ISLES MEDICAL CENTER INC.**

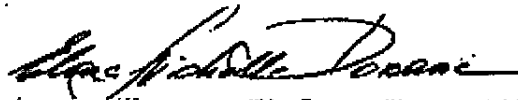
Address of Corporation: **17100 COLLINS AVENUE SUITE 207 R.K. PLAZA
SUNNY ISLES, FLORIDA 33160**

Article 2: Capital Stock: The number of shares which the corporation has authorized to be outstanding at any one time is **2,000**, with a par value of **\$0.01**.

Article 3: REGISTERED AGENT: **ELENA MICHELLE DORANE**

REGISTERED OFFICE: **17100 COLLINS AVENUE SUITE 207
SUNNY ISLES, FLORIDA 33160**

*I am familiar with and hereby accept the duties and responsibilities as Registered Agent for said corporation.



Signature of Registered Agent

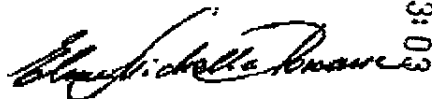
Article 4: The Board of Directors are: (Board of Directors is NOT REQUIRED).
First listed is President, Second is Vice President, then Secretary/Treasurer.

1. **ELENA MICHELLE DORANE, 17100 COLLINS AVENUE, SUITE 207, SUNNY ISLES, FLORIDA 33160**
2. **ALLEN DAVID DORANE, 17100 COLLINS AVENUE, SUITE 207, SUNNY ISLES, FLORIDA 33160**
3. **VICTOR STERN, 17100 COLLINS AVENUE, SUITE 207, SUNNY ISLES, FLORIDA 33160**

Article 5: The NAME and ADDRESS of the INCORPORATOR is:

**ELENA MICHELLE DORANE
17100 COLLINS AVENUE SUITE 207
SUNNY ISLES, FLORIDA 33160**

In witness whereof, I have subscribed my name:



Signature of Incorporator

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