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CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. JOSE R. REY M.D. P.A.
(Corporation Name) (Document #)

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	NEW FILINGS
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	Other

	AMENDMENTS
	Amendment
	Resignation of R.A., Officer/Director
	Change of Registered Agent
	Dissolution/Withdrawal
	Merger

	OTHER FILINGS
	Annual Report
	Fictitious Name
	Name Reservation

	REGISTRATION/ QUALIFICATION
	Foreign
	Limited Partnership
	Reinstatement
	Trademark
	Other

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6/29

Examiner's Initials

CR2E031(9/92)

ARTICLES OF INCORPORATION
In compliance with Chapter 621, F.S., Professional Association

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TALLAHASSEE FLORIDA

ARTICLE I NAME
The name of the corporation shall be:

JOSE R. REY M.D. P.A.

ARTICLE II PRINCIPLE OFFICE
The principle place of business/mailing address is:

12890 BISCAYNE BLVD.
NORTH MIAMI, FL. 33181

ARTICLE III PURPOSE
The purpose for which the corporation is organized is:

FAMILY PRACTICE
EMERGENCY MEDICINE
INTERNAL MEDICINE

ARTICLE IV SHARES
The number of shares of stock is: 100 SHARES

ARTICLE V OFFICERS/DIRECTORS (OPTIONAL)
The name(s) and address(es):

JOSE R. REY M.D.
12890 BISCAYNE BLVD
NORTH MIAMI FL. 33181

ARTICLE VI REGISTERED AGENT
The name and Florida street address of the registered agent is:

JOSE R. REY M.D.
12890 BISCAYNE BLVD
NORTH MIAMI FL 33181

ARTICLE VII INCORPORATOR
The name and address of the Incorporator is:

JOSE R REY MD
12890 BISCAYNE BLVD.
NORTH MIAMI, FL. 33181

****

I hereby ~~accept the appointment~~ as Registered Agent & agree to act in this capacity.

Signature/Registered Agent — 6/28/2000 Date

Signature/Incorporator — 6/28/2000 Date