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Florida Department of State  
Division of Corporations  
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Katherine Harris, Secretary of State

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To:

Division of Corporations  
Fax Number : (850) 922-4001

From:

Account Name : FAS-T CORP. AGENTS, INC.  
Account Number : 071001002335  
Phone : (305) 599-0839  
Fax Number : (305) 716-0346

**FLORIDA PROFIT CORPORATION OR P.A.**

**SURGICAL INSTITUTE OF HOMESTEAD, INC.**

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$78.75

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ARTICLES OF INCORPORATION  
OF  
SURGICAL INSTITUTE OF HOMESTEAD, INC.

I , the undersigned, do hereby acknowledge and file in the office of the Secretary of State of the State Of Florida, for the purpose of forming a Corporation for profit, in accordance with the Laws of State Of Florida, and do hereby adopt the following Articles of Incorporation.

ARTICLE 1

The name of the Corporation shall be :

SURGICAL INSTITUTE OF HOMESTEAD, INC.

ARTICLE 2

The general nature of the business and business to be transacted are as follows:  
This Corporation may engage in any activity or business permitted under the Laws of the UNITED STATES OF AMERICA and the STATE OF FLORIDA.

ARTICLE 3

SHARES

- a) The authorized capital stock of this Corporation shall consist of one class, namely common stock.
- b) The authorized capital stock of this Corporation shall consist of FOUR THOUSAND Shares of Common Stock, NO-PAR VALUE.

ARTICLE 4

The Corporation shall have perpetual existence.

ARTICLE 5

The amount of capital with which this Corporation shall begin shall be not less than FIVE HUNDRED DOLLARS. ( \$ 500.00 )

Prepared by

MARIA E. HERNANDEZ  
8366 SW 8th ST  
MIAMI, FL. 33144  
(305) 262-6070

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ARTICLE 6

The initial Post Office address of principal place of business of this Corporation shall be 8366 SW 8th ST. MIAMI, FL. 33144

ARTICLE 7

The Corporation shall have not less than one nor more than five Directors as provided by the Bylaws and they shall hold office for one year or until their successors have been duly elected.

ARTICLE 8BOARD OF DIRECTORS

<u>NAME</u>	<u>TITLE</u>	<u>ADDRESS</u>
MARIA E. HERNANDEZ	PRES.-SECRETARY	8366 SW 8th ST MIAMI, FL. 33144

ARTICLE 9

The registered agent of this Corporation shall be :

MARIA E. HERNANDEZ 8366 SW 8th ST. MIAMI, FL. 33144

ARTICLE 10

The names and Post Office addresses of the subscribers to the ARTICLES OF INCORPORATION together with the number of shares which each agrees to take, and the value of the consideration for same, are as follows :

<u>NAME</u>	<u>ADDRESS</u>	<u>NO. OF SHARES</u>	<u>VALUE OF SHARES</u>
MARIA E. HERNANDEZ	8366 SW 8th ST MIAMI, FL. 33144	500	\$ 500.00

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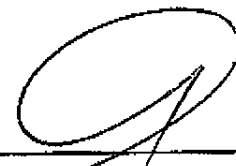
SUBSCRIBED at Miami, Dade County, Florida, this 6 day of JULY,  
A.D. 2000.

  
\_\_\_\_\_  
MARIA E. HERNANDEZ

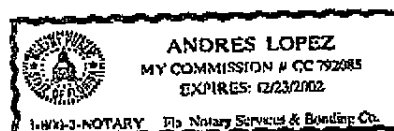
STATE OF FLORIDA )  
COUNTY OF DADE ) SS:

I certify that on this day before me, a Notary Public of the State of Florida,  
duly qualified and acting, personally appeared MARIA E. HERNANDEZ

\_\_\_\_\_  
to me well known, and being by me first duly sworn and cautioned, upon their oath  
deposed and said that they acknowledged that they had signed the above and foregoing  
ARTICLES OF INCORPORATION for the purposes therein set forth.  
WITNESS my hand and official seal at Miami, Dade County, Florida, this 6  
day of JULY A.D., 2000.

  
\_\_\_\_\_  
NOTARY PUBLIC

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CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN THIS STATE, NAMING AGENT UPON WHOM PROCESS MAY BE SERVED.

In pursuance of Chapter 48.091, Florida Statutes, the following is submitted, in compliance with said Act:

First -- That SURGICAL INSTITUTE OF HOMESTEAD, INC.  
desiring to organize under the laws of the State of FLORIDA with its  
principal office, as indicated in the Articles of Incorporation at  
City of MIAMI County of DADE State of  
Florida, has named MARIA E. HERNANDEZ  
located at 8366 SW 8th ST  
City of MIAMI, County of DADE  
State of Florida, as its Agent to accept service of process within  
this State.

ACKNOWLEDGMENT: ( MUST BE SIGNED BY DESIGNATED AGENT )

Having been named to accept service of process for the above stated Corporation, at place designated in these Articles of Incorporation, I, hereby, accept to act in this capacity, and agree to comply with the provision of said Act relative to keeping open said office.

BY   
( REGISTERED AGENT )  
MARIA E. HERNANDEZ

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