

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

SUBJECT:	DOCTORS HEALTH (PROPOSED CORPORAT	Group N.W. Ename – <u>Must Incl</u> i	Twe.	w · · ·	
70003355097—4 -08/14/0001072014 *****78.75 *****78.75 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 ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status		
FROM:	Name (Printed or typed) Z435 N.W. 7th Struct Address Address				
MIAMI, FIA 33125-3134 City, State & Zip 305-443-3320 Daytime Telephone number				4	

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

g/2/21

ARTICL S OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621. F.S. (Profit)	
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)	
ARTICLE I NAME The name of the corporation shall be:	TA'S C
•	JO AI
DOCTORS HEALTH GROUP N.W. INC.	HAS - T
ARTICLE II PRINCIPAL OFFICE	
The principal place of business/mailing address is:	PM 4:0
2435 N.W. 7th Street.	TATE OF
MIAMI, Florida 33125-3134	A
ARTICLE III PURPOSE The purpose for which the corporation is organized is:	
To conclud BUSINESS WITHIN THE STAT	e of Florida
15 CO RECOUNTY TOUSINESS WITHIN	
ARTICLE IV SHARES	·
The number of shares of stock is:	
900	
ARTICLE V INITIAL OFFICERS/DIRECTORS (optional) The name(s) and address(es):	
File Mor 12953 N.W. 18 Ct Pembroke Pin	es Fla 33028 - (President
The name(s) and address(es): Eddie Mor 12953 N.W. 18 Ct Pembroke Print Elba Miriam Mor 1717 N. Bayakore Dr. #2751 APTICLE VI. DECISTERED ACENT	MIDNI, FID 33134 (VICE-Presiden
ARTICLE VI REGISTERED AGENT	
The name and Florida street address of the registered agent is:	
Eddie MOR Z435 N.W 7 St	
MIAMI F/0 33/25	
ARTICLE VII INCORPORATOR	
The name and address of the Incorporator is:	*
Eddie Mor 2435 N.W. 7 St Min	i HURIDA 33/25-3134
2.35	

Having been named as registered agent to accept service of process for the above state certificate, I am familiar with and accept the appointment as registered agent and agree	
of M	
Signature/Registered Agent	8/8/2000 Date
Signature/Registered Agent	Date - / - /
Edd .	8/8/2000
Signature/Incorporator	Date