

P00000082013
TRANSMITTAL LETTER

FILED
00 AUG 25 AM 9:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

SUBJECT : *Cedars Heart Institute, Inc.*
(Proposed corporate name - must include suffix)

100003373321--2
-08/25/00--01065--001
*****78.50 *****78.50

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

\$78.50 Filing Fee & Certificate \$122.50 Filing Fee & Certified Copy

FROM : *Ahmad M. Hamzah*
Name
503 W. Dr. M. L. K. Blvd.
Street Address
Tampa FL 33603
City, State & zip
(813) 883-6704
Daytime Phone Number

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

Pa 8/30/00

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of incorporation.

ARTICLE I NAME

The name of the corporation shall be :

Cedars Heart Institute, Inc.

ARTICLE II PRINCIPAL OFFICE

The principle place of business and mailing address of this corporation shall be :

*503 W. Dr. M. L. K. Blvd.
Tampa FL 33603*

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is **(100) one hundred shares of one dollar (\$1.00) par value common stock, which shall be designated "COMMON STOCK" .**

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is :

*Ahmad M. Hamzah
503 W. Dr. M. L. K. Blvd.
Tampa FL 33603*

ARTICLE V INCORPORATOR(S)

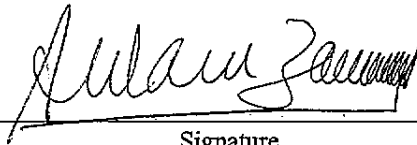
The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is (are) :

*Ahmad M. Hamzah
503 W. Dr. M. L. K. Blvd.
Tampa FL 33603*

President

The undersigned incorporator(s) has (have) executed these Articles of Incorporation this

21st day of August 2000



Signature

Signature

Signature

Signature

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT / REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 OR 617.0501, FLORIDA STATUTES THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE / REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is : Cedars Heart Institute, Inc.


2. The name and address of the registered agent and office is :

Ahmad M. Hamzah
(Name)

503 W. Dr. M. L. K. Blvd.
(P.O.BOX "not" accepted)

Tampa FL 33603
(City/State/Zip)

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in the certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.


Signature

August 21, 2000
Date