

# P00000085398

Florida Department of State  
Division of Corporations  
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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

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

**M.C.A. OF COLOMBIA, INC.**

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

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ARTICLES OF INCORPORATION

OF

M. C. A. of COLOMBIA, INC.

ARTICLE I - CORPORATE NAME

The name of the Corporation is: M. C. A. of COLOMBIA, INC.

ARTICLE II - NATURE OF BUSINESS AND POWERS

The principal nature of the business to be transacted by this corporation is to engage any business permitted under the Laws of the state of Florida, and especially health, insurance and health management.

ARTICLE III - CAPITAL STOCK

The maximum number of shares of stock that this Corporation is authorized to issue and have outstanding at any one time is (100) shares of common stock having per value of (\$1.00) per share.

ARTICLE IV - TERMS OF EXISTENCE

This Corporation shall have perpetual existence commencing upon the filing of these articles.

ARTICLE V - REGISTERED AGENT AND PRINCIPAL OFFICE

The Registered Agent and the street address of the initial Registered Office of this Corporation in the State of Florida shall be: WILFREDO O. ALLEN, 2250 SW 3<sup>RD</sup> AVENUE, SUITE 201, MIAMI, FLORIDA 33129. The street address of the principal office of this Corporation shall be 999 Ponce de Leon Blvd. Suite 940, Coral Gables, Florida 33134. The Board of Directors from time to time may move the Registered Office to any other address in the State of Florida.

ARTICLE VI - BOARD OF DIRECTORS

This Corporation shall have (1) director initially. The number of directors may be increased or diminished from time to time by the Bylaws adopted by the Stockholders, but shall never be less than one.

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ARTICLE VII - INITIAL DIRECTOR

The name of the initial director of this Corporation and their street address is:

NAME  
JULIO AVELLO

ADDRESS  
999 PONCE DE LEON BLVD.  
SUITE 940  
CORAL GABLES, FL 33134

The persons named as initial director shall hold office for the first year of existence of this Corporation or until their successors are elected or appointed and have qualified, whichever occurs first.

ARTICLE VIII - INCORPORATOR

The name and street address of the person signing these Article of Incorporation as the Incorporator is:

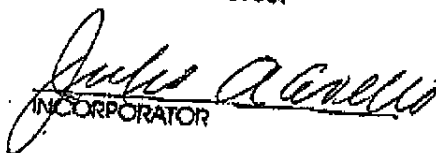
NAME  
JULIO AVELLO

ADDRESS  
999 PONCE DE LEON BLVD.  
SUITE 940  
CORAL GABLES, FL 33134

ARTICLE IX - AMENDMENTS

These Articles of Incorporation may be amended in the manner provided by law. Every amendment shall be approved by the Board of Directors, proposed by them to the stockholders and approved at a stockholder's meeting by at least a majority of the stockholders entitled to vote, unless all of the directors and all of the stockholders sign a written statement manifesting their intention that a certain amendment of these Articles of Incorporation be made.

IN WITNESS WHEREOF, the undersigned, as Incorporator (s), have executed the foregoing Article of Incorporation, on this 5<sup>th</sup> day of SEPTEMBER 2000.

  
INCORPORATOR

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stockholders and approved at a stockholder's meeting by at least a majority of the stockholders entitled to vote, unless all of the directors and all of the stockholders sign a written statement manifesting their intention that a certain amendment of these Articles of Incorporation be made.

IN WITNESS WHEREOF, the undersigned, as Incorporator (s), have executed the foregoing Article of Incorporation on this 24<sup>th</sup> day of JULY 2000.

Julio Avello  
INCORPORATOR

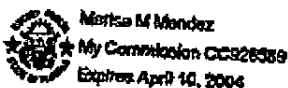
ACKNOWLEDGMENT OF REGISTERED AGENT

Having been named to accept service of process for the above state corporation, at place designated in this Certificate, I hereby accept to act in this capacity, and agrees to comply with the provision of said Act relative to keeping open said office.

Wifredo  
REGISTERED AGENT

STATE OF FLORIDA     )  
COUNTY OF DADE )

BEFORE ME, the undersigned authority, duly authorized to administer oaths, personally appeared, JULIO AVELLO, the person described as Incorporator and who executed the foregoing Articles of Incorporation, and acknowledged before me that she subscribed to these Articles of Incorporation, on this 24<sup>th</sup> day of July 2000, and showed as identification Personally known.



Marisa M. Mendez  
Notary Public - State of Florida

MY COMMISSION EXPIRES:

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ACKNOWLEDGMENT OF REGISTERED AGENT

Having been named to accept service of process for the above state corporation,  
at place designated in this Certificate, I hereby accept to act in this capacity, and agrees to  
comply with the provision of said Act relative to keeping open said office.

WHL OAIL  
REGISTERED AGENT

STATE OF FLORIDA)

COUNTY OF DADE )

BEFORE ME, the undersigned authority, duly authorized to administer oaths, personally  
appeared, JULIO AVELLO, the person described as incorporator and who executed the foregoing  
Articles of Incorporation, and acknowledged before me that she subscribed to these Articles of  
Incorporation, on this 9<sup>TH</sup> day of September 2000, and showed as identification  
\_\_\_\_\_.

[Signature]  
Notary Public - State of Florida

MY COMMISSION EXPIRES:



Hugo Vega  
Commission # 00912581  
Expires Feb. 21, 2004  
Banded Firm  
Atlantic Bonding Co., Inc.

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TALLAHASSEE, FLORIDA

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