<u>RUS CORPORATE FILING SERVICĚ</u> (Requestor's Name) 3320 S.W. 87 AVENUE (Address) MIAMI, FLORIDA (305)552-5973 (City, State, Zip) TERESA ROMAN (TALLAHASSEE REPRESENTATIVE) OFFICE USE ONLY CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known): 2. (Corporation Name) (Document #) (Corporation Name) (Document #) (Document #) (Corporation Name) Pick up time Certified Copy Walk in Certificate of Status Will wait Mail out Photocopy

: 18 (17.8	NEW FILINGS
X	Profit
	NonProfit
	Limited Liability
	Domestication
	Other

OTHER FILNGS		
	Annual Report	
	Fictitious Name	
	Name Reservation	

Аг	nendment
Re	signation of R.A., Officer/Director
Cŀ	ange of Registered Agent
Di	ssolution/Withdrawal
М	erger

REGISTRATION/ QUALIFICATION
Foreign
Limited Partnership
Reinstatement
 Trademark
Other

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Examiner's Initials

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.

<u> ARTICLE I – NAME</u>

The name of the corporation shall be: LIXANDRA MEDICAL CENTER, II

<u>ARTICLE II – PRINCIPAL OFFICE</u>

The principal place of business and mailing of this corporation shall be:

489 Hialeah Drive Suite 5 Hialeah, FL 33010

ARTICLE III -SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

ARTICLES IV -INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Regino Gonzalez 489 Hialeah Drive Suite 5 Hialeah, FL 33010

ARTICLE V - INCORPORATOR

The name and street address of the incorporator to these Articles of
Incorporation is: Regino Gonzalez, 489 Hialeah Drive Svite 5
Hialeuh, FL 33010
The undersigned incorporator has executed these Articles of Incorporation this 16 day of November 2000
Signature
Signature
ARTICLE VI- DIRECTOR(S)
711.17.5
me () and advant additional of the director(s) to those Articles of
The name(s) and street address(es) of the director(s) to these Articles of Incorporation is (are):
President - Regino Gonzalez
489 Hialeah Drive Svite 5
Hialeuh, FL 33010
lice-President - Omar Linares
489 Hialeah Drive Suite 5
Hialeah, FL 33010
CERTIFICATE OF DESIGNATION OF REGISTERED AGENT / REGISTERED OFFICE
Having been named as Registered Agent and to accept service of process for the
the appointment as Registered Agent and agree to act in this capacity and see the proper
complete nerformance of my duties, and Lam Jumina with and weep the
obligations of my position as Registered Agent.
RA N
Registered Ngent Signature