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## Florida Department of State

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Account Number : 071001002335

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# FLORIDA PROFIT CORPORATION OR P.A.

DR. YAMILE VILLAR, P.A.

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Secretary of State

December 19, 2000

FAS-T

SUBJECT: DR. YAMILE VILLAR, P.A.

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#### ARTICLES OF INCORPORATION OF DR. YAMILE VILLAR, P.A.

THE UNDERSIGNED INCORPORATOR, FOR THE PURPOSE OF FORMING A CORPORATION UNDER THE FLORIDA GENERAL CORPORATE ACT, HEREBY ADOPTS THE FOLLOWING ARTICLES OF INCORPORATION.

ARTICLE I: NAME

THE NAME OF THE CORPORATION SHALL BE:

DR. YAMILE VILLAR, P.A.

ARTICLE II: NATURE OF THE BUSINESS PRACTICE OF OPHTHALMOLOGIST

THIS CORPORATION MAY ENGAGE IN OR TRANSACT ANY OR ALL LAWFUL ACTIVITIES OR BUSINESS PERMITTED UNDER THE LAWS OF THE UNITED STATES, THE STATE OF FLORIDA, AND ANY OTHER STATE, COUNTRY, TERRITORY OR NATION. THE PRINCIPAL PLACE OF BUSINESS AND MAILING ADDRESS OF THIS CORPORATION SHALL BE:

DR. YAMILE VILLAR, P.A. 14526 NW 83RD PASSAGE MIAMI LAKES, FLORIDA 33016

#### ARTICLE III: CAPITAL STOCK

THE AGGREGATE NUMBER OF SHARES OF STOCK AND ITS PAR VALUE THAT THIS CORPORATION IS AUTHORIZED TO ISSUED AND HAVE OUTSTANDING AT ANY ONE TIME IS: 1,000 SHARES OF COMMON STOCK, PAR VALUE \$1.00 PER SHARE.

ARTICLE IV: TERM OF EXISTENCE

THIS CORPORATION SHALL EXIST PERPETUALLY.

#### ARTICLE V: OFFICERS AND DIRECTORS

THE NAMES AND STREET ADDRESSES OF THE INITIAL OFFICER AND DIRECTOR, WHO SHALL HOLD OFFICE THE FIRST DAY OF THE CORPORATION EXISTENCE UNTIL THEIR SUCCESSORS ARE ELECTED ARE:

PRESIDENT:

DR. YAMILE VILLAR 14526 NW 83RD PASSAGE MIAMI LAKES, FL 33016

### ARTICLE VI: INCORPORATOR

THE NAME AND STREET ADDRESS OF THE INCORPORATOR TO THESE ARTICLES OF INCORPORATION.

DR. YAMILE VILLAR 14526 NW 83RD PASSAGE MIAMI LAKES, FLORIDA 33016

IN WITNESS WHEREOF, THE UNDERSIGNED INCORPORATOR HAS EXECUTED THESE ARTICLES OF INCORPORATION THIS DECEMBER 13, 2000

SIGNATURE OF INCORPORATOR

DE YAMILE VILLAR

# CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

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

1. THE NAME OF THE CORPORATION IS:

DR. YAMILE VILLAR, P.A.

2. THE NAME AND ADDRESS OF THE REGISTERED AGENT AND OFFICE IS:

DR. YAMILE VILLAR 14526 NW 83 PASSAGE MIAMI LAKES, FLORIDA 33016

SIGNATURE:

DR. YAMILE VILLAR

DATE: DECEMBER 13, 2000

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 AND AGREED 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.

DR.\YAMILE VILLAR

DATE: DECEMBER 13, 2000