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EXPRESS CORPORATE FILING SERVICE INC.
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CORAL GABLES, FL 33134 305-444-4994
(City, State, Zip) (Phone #)

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-06/27/01--01084--006

*****78.75 *****78.75

OFFICE USE ONLY

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. A.E. Cuesta, M.D., P.A.
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

- ☐ Walk in ☒ Pick up time ☒ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

| NEW FILINGS | |
|-------------------------------------|-------------------|
| <input checked="" type="checkbox"/> | Profit |
| <input type="checkbox"/> | NonProfit |
| <input type="checkbox"/> | Limited Liability |
| <input type="checkbox"/> | Domestication |
| <input type="checkbox"/> | Other |

| AMENDMENTS | |
|--------------------------|---------------------------------------|
| <input type="checkbox"/> | Amendment |
| <input type="checkbox"/> | Resignation of R.A., Officer/Director |
| <input type="checkbox"/> | Change of Registered Agent |
| <input type="checkbox"/> | Dissolution/Withdrawal |
| <input type="checkbox"/> | Merger |

| OTHER FILINGS | |
|--------------------------|------------------|
| <input type="checkbox"/> | Annual Report |
| <input type="checkbox"/> | Fictitious Name |
| <input type="checkbox"/> | Name Reservation |

| REGISTRATION/ QUALIFICATION | |
|--------------------------------|---------------------|
| <input type="checkbox"/> | Foreign |
| <input type="checkbox"/> | Limited Partnership |
| <input type="checkbox"/> | Reinstatement |
| <input type="checkbox"/> | Trademark |
| <input type="checkbox"/> | Other |

Examiner's Initials

ARTICLES OF INCORPORATION

The undersigned natural persons, each of whom is licensed or otherwise legally authorized to practice the profession of law in the State of Florida, hereby associate themselves with the intention of forming a professional corporation in accordance with the Florida Professional Service Corporation Act, and hereby adopt the following articles of incorporation for such corporation:

ARTICLE I, NAME

The name of the corporation shall be:

A.E. Cuesta, M.D., P.A.

ARTICLE II, PURPOSE

The purpose of the corporation shall be to practice medicine in the State of Florida

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TALLAHASSEE FLORIDA

ARTICLE III, CAPITAL STOCK

The total number of shares of capital stock which the corporation shall be authorized to issue is 100 shares. Such shares shall be of a single class of common stock, and shall have a par value of One dollar (\$1.00) per share.

ARTICLE IV, CAPITALIZATION

The amount of capital with which the corporation will begin to practice the profession of medicine is not less than One Hundred Dollars (\$100.00).

ARTICLE V, DURATION

The Corporation shall have perpetual existence.

ARTICLE VI, PRINCIPAL OFFICE

The initial street address of the corporation's principal office is:

4122 Cottonwood Circle
Palm Beach Gardens, Fl 33410

ARTICLE VII, MANAGEMENT BY SHAREHOLDERS

The corporation shall be a close corporation within the meaning of, and governed by, the Florida Close Corporation Act. The business of the corporation shall be managed by its shareholders pursuant to section 608.72 of the Florida Statutes and there shall be no directors.

ARTICLE VIII, SUBSCRIBERS

The name and address of each person signing these articles of incorporation as a subscriber is:

| | |
|------------------------------|--------------------------|
| Angel E. Cuesta | President/Secretary 100% |
| 4122 Cottonwood Circle | |
| Palm Beach Gardens, Fl 33410 | |

ARTICLE IX, DISSOLUTION

The corporation may be dissolved at any time (1) by unanimous written consent of the shareholders; or (2) on the affirmative vote of the holders of at least two thirds of the outstanding shares of the corporation entitled to vote thereon. On dissolution, the corporate property and assets shall, after payment of all debts of the corporation, be distributed to the shareholders pro rata, each shareholder to participate in the distribution in direct proportion to the number of shares held by him.

ARTICLE X, REGISTERED AGENT AND REGISTERED ADDRESS

The name and address of the registered agent is as follows:

Angel E. Cuesta
4122 Cottonwood Circle
Palm Beach Gardens, Fl 33410

CERTIFICATE DESIGNATING PLACE OF BUSINESS OF DOMICILE FOR THE SERVICE OF PROCESS WITHIN FLORIDA, NAMING AGENT UPON WHOM PROCESS MAY BE SERVED IN COMPLINACE WITH SECTION 48.091, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED:

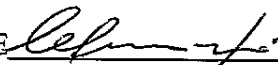
FIRST-THAT A.E. Cuesta, M.D., P.A. DESIRING TO ORGANIZE OR QUALIFY UNDER THE LAWS OF THE STATE OF FLORIDA, WITH ITS PRINCIPAL PLACE OF BUSINESS AT CITY OF Palm Beach Gardens STATE OF FLORIDA, HAS NAMED Angel E. Cuesta, LOCATED AT 4122 Cottonwood Circle CITY OF Palm Beach Gardens, STATE OF FLORIDA, AS ITS AGENT TO ACCEPT SERVICE PROCESS WITHIN FLORIDA.

SIGNATURE  (Corporate Officer)

TITLE PRESIDENT

DATE 6/5/01

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THE CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES.

SIGNATURE  (Resident Agent)

DATE 6/05/01

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