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Florida Department of State

Division of Corporations Public Access System Katherine Harris, Secretary of State

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To:

Division of Corporations

Fax Number

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Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number : 072450003255 Phone

: (305)634-3694

Fax Number

: (305)633-9696

FLORIDA PROFIT CORPORATION OR P.A.

HERNANDEZ PULMONARY ASSOCIATES, P.A.

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

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ARTICLES OF INCORPORATION

OF

HERNANDEZ PULMONARY ASSOCIATES, P.A.

The undersigned incorporator(s), for the purpose of forming a Professional Service Corporation under Chapter 621 of the Florida Statutes, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I - NAME

The name of the corporation shall be:

HERNANDEZ PULMONARY ASSOCIATES, P.A.

ARTICLE II - PRINCIPAL OFFICE AND MAILING ADDRESS

The principal place of business is:

3659 S. Miami Avenue Suite 5002 Miami, Florida 33133

The mailing address of this corporation shall be:

2450 S.W. 137th Avenue Suite 226 Miami, Florida 33175

ARTICLE III - PURPOSE

The purpose of this corporation shall be to engage in the business of providing medical services and all related services, and in all business incidental thereto and may engage in any activity or business permitted under the Florida Professional Services Corporation Act. The corporation shall have all of the powers vested in a corporation organized under and existing by virtue of such laws.

ARTICLE IV - CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any one time is 10,000 shares having an individual par value of One Cent (\$.01).

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Document Prepared by:

Ivette Halphen Leon, Esq.

Florida Bar No.: 981834
2450 S.W. 137th Avenue

Suite 226

Miami, Florida 33175

SECRETARY OF STATE STATE OF CORPORATIONS OF CORPORATIONS

ARTICLE V - INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:

A&P Registered Agent, Inc. 2450 S.W. 137th Avenue Suite 226 Miami, Florida 33175

ARTICLE VI - BOARD OF DIRECTOR

The name and address of the initial board of directors shall be:

Manuel J. Hernandez, M.D. 3659 S. Miami Avenue Suite 5002 Miami, Florida 33133

ARTICLE VII - OFFICER(S)

The name, title and address of the officers of this corporation shall be:

Manuel J. Hernandez, M.D.
President, Secretary and Treasurer
3659 S. Miami Avenue
Suite 5002
Miami, Florida 33133

ARTICLE VIII - INCORPORATOR(S)

The name and address of the incorporator to these Articles of Incorporation shall be:

Manuel J. Hernandez, M.D. 3659 S. Miami Avenue Suite 5002 Miami, Florida 33133

IN WITNESS WHEREOF, the undersigned, as the Incorporator(s), have executed the

foregoing Articles of Incorporation this _____ day of October, 2001.

MANUEL I HERNANDEZ, M.D.

Incorporator

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STATE OF FLORIDA)) SS:
	, 55.
COUNTY OF MIAMI-DADE)

BEFORE ME, a Notary Public, personally appeared MANUEL J. HERNANDEZ, M.D. to me known to be the person described as Incorporator and who executed the foregoing Articles of Incorporation, and he acknowledged before me that he subscribed to these Articles of Incorporation for the purposes therein expressed.

WITNESS my hand and official seal at Miami, Dade County, Florida, this __

October, 2001.

Notary Public

<u>f Flo</u>rida at Large

My Commission Expires:

CERTIFICATE OF DESIGN REGISTRED AGENT/REGISTRED OFFICE

METEHALPHEN LEON Natury Public - State of Florida

Contribute Equive Sep ! 1, 2004

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in the Articles of Incorporation, 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.

day of October, 2001. Dated this

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Ivette Helphen Leon, Esq., President A&P Registered Agent, Inc.