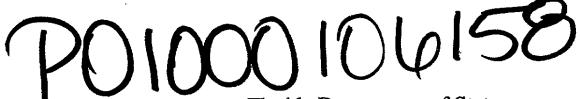
Division of Corporations

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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 : (850)205-0381

From:

Account Name : R & R ACCOUNTING & TAX SERVICES, INC.

Account Number : 071324000655 Phone : (305)541-0790 Fax Number : (305)541-4015

FLORIDA PROFIT CORPORATION OR P.A.

Ausberto A. Bianchi M.D. P.A.

Certificate of Status	1
Certified Copy	-0
Page Count	(05)
Estimated Charge	\$78.75

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SECRETARY OF STATE AHASSEF, FLORIDA

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ARTICLES OF INCORPORATION

OF

AUSBERTO A. BIANCHI M.D. P.A.

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.

ARTICLE | NAME

The name of the corporation shall be:

AUSBERTO A. BIANCHI M.D. P.A.

ARTICLE II PRINCIPAL OFFICE

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

6355 S.W. 136 COURT UNIT 1075 HIRMI, FL. 33183

ARTICLE III SHARES

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

500 SHARES OF COMMON STOCK AT \$1.00 PAR VALUE.

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

AUSBERTO BIANCHI 6355 S.W. 136 COURT UNIT 1075

MIAMI, FL 33183

PAEPAREO 87: ALBERTO 4. BIANCHI 6355 S.W. 136 CT MIRMI, PL 33183

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ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

AUSBERTO BIANCHI P. VP, S,T 6355 S.W. 136 CT UNIT 1075 HIAMI, FL 33183

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

11th Circonára.	
2 nd	day of
	•
\checkmark	Laudu
^	Signature
	Signature
	Signature

¥ 5/ 6

ARTICLE VI NATURE OF BUSINESS

The specific nature of the professional association is:

Medical Services

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CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 or 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1.	The name of the corporation is: AUSBERTO A. BIRNCHI MD. P.A.		_
2.	The name and address of the registered agent and office is:	-<u>**</u>:	-
	AUSBERTO A. BIANCHI LACRE (Name)	O1 NOV	
	(Name)	. A0	11
	6355 S.W. 136 COURT UNIT 1075	2	
	(P.O. Box not acceptable)	PM	
	MINHI FL 33183	2:2	U
	(City/State/Zip)	ف	

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

(Signature)

DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL

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