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To:

Division of Corporations

Fax Number : (8

: (850)205-0381

From:

Account Name : FAS-T CORP. AGENTS, INC.

Account Number : 071001002335 Phone : (305)599-0839 Fax Number : (305)716-0346

FLORIDA PROFIT CORPORATION OR P.A.

JAO ANESTHESIA, INC.

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Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

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ARTICLES OF INCORPORATION

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JAO ANESTHESIA, INC.

The undersigned incorporators desire to form a corporation pursuant to Chapter 607, Florida Statutes and hereby adopt the following articles of incorporation for such corporation.

ARTICLE I

NAME: The name of the corporation shall be:

JAO ANESTHESIA, INC.

ARTICLE II

PURPOSE AND POWER: The purpose for which the corporation is formed is to engage in any activity and business permitted under the laws of the State of Florida.

ARTICLE III

PRINCIPAL OFFICE: The address of the corporation's principal office shall be:

349 N.E. 117 STREET MIAMI, FL. 33161

ARTICLE IV

INCORPORATOR(S): The name and address of the incorporator(s) is

(are):

AIDA L. BAEZ 349 N.E. 117 STREET MIAMI, FL. 33161 O NOV II. AMIO: 58

ARTICLE V

<u>DIRECTORS:</u> The number of directors constituting the corporation's initial Board of Directors is (are) one whose name and addresses is (are):

AIDA I. BAEZ 349 N.E. 117 STREET MIAMI, FL. 33161

OFFICERS:

President:AIDA I. BAEZ349 N.E. 117 ST., MIAMI, FL. 33161Vice President:OCTAVIO BAEZ349 N.E. 117 ST., MIAMI, FL. 33161Secretary:AIDA I. BAEZ349 N.E. 117 ST., MIAMI, FL. 33161Treasurer:AIDA I. BAEZ349 N.E. 117 ST., MIAMI, FL. 33161

ARTICLE VI

SHARES OF STOCKS: The aggregate number of shares of stock the corporation is authorized to issue is **100** shares which shares shall be common stock having **\$1.00** par value.

<u>ARTICLE VII</u>

DURATION: The duration of the corporation shall be perpetual.

<u>ARTICLE VIII</u>

REGISTER AGENT: The name and address of the permanent registered agent is:

AIDA L. BAEZ 349 N.E. 117 STREET MIAMI, FL. 33161

IN WITNESS THEREOF, We have executed these articles of Incorporation in Miami, Miami-Dade County, Florida on this 13th day of November, 2001.

SWORN AND SUBSCRIBED before me on this 13th day of November, 2001.

ANGEL D. CORDOVA

NOTARY PUBLIC, State of Floridate : Frant of M.O. GREGOVA

BONDED THRU ASA 1-868-MOTARYT

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In compliance with section 607.034 of the Florida Statutes, the following is submitted: desiring to organize or qualify under the laws of the State of Florida, with its principal place of business in the City of MIAMI County of MIAMI-DADE State of Florida has name AIDA I. BAEZ located at 349 N.E. 117 ST., MIAMI, FL. as its agent to accept service of process within the State of Florida.

Mailing address is: 349 N.E. 117 STREET MIAMI, F.L. 33161

ACKNOWLEDGMENT

Having been name to accept service of process for the above mentioned corporation, at the place designated in this Certificate, I hereby am familiar with and accept the duties and responsibilities as register agent for said corporation and agree to act in this capacity, and further agree to comply with the provisions of all Statutes relative to the proper and complete performance of my duties.

Dated this 13th day of November, 2001.

AIDA I. BAEZ REGISTER AGENT