

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

DOOOOSO98350--1 -03/13/02--01008--004 *****87.50 *****87.50

SUBJECT: JOSE J. RODRIGUEZ, M.D., P.A.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

□ \$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy ADDITIONAL CO	& Certificate of Status	
FROM:	JOSE J. RODRIGUEZ, M.D., P.A. Name (Printed or typed)			
	300 NW 114 Avenue # 105 Address			02 MAR
-	MIAMI, FL 33	172 , State & Zip		12 PM

NOTE: Please provide the original and one copy of the articles.

OFFICIAL NOTARY SEAL
NAYRA M TORREILA
NOTARY PUBLIC STATE OF FLORIDA
COMMISSION NO. CC936368
MY COMMISSION EXP. MAY 18,2004

03/08/02 n. 3/19 ARTICLES OF INCORPORATION

The name of the corporation shall be:

JOSE J. RODRIGUEZ, M.D., P.A

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

300 NW 114 Avenue # 105 MIAMI, FL 33172

ARTICLE III **PURPOSE**

The purpose for which the corporation is organized is:

MEDICAL DOCTOR

ARTICLE IV SHARES

The number of shares of stock is:

1000 Shares having an individual per value of \$1.00.

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

JOSE J. RODRIGUEZ, M.D., P.A. 300 NW 114 Avenue # 105 MIAMI, FL 33172

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

JOSE J. RODRIGUEZ, M.D., P.A. 300 NW 114 Avenue # 105 MIAMI, FL 33172

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

JOSE J. RODRIGUEZ, M.D., P.A. 300 NW 114 Avenue # 105 MIAMI, FL 33172

Having been named as registered agent fo accept service of process for the above stated corporation at the place designated in this

certificate, I am familiar with and accept tife appointment as registered agent and agree to act in this capacity

Signature/Registered

Signature/Incorporator

03/08/02 Date 03/08/02

OFFICIAL NOTARY SEAL NAYRA M TORRELLA NOTARY PUBLIC STATE OF FLORIDA COMMISSION NO. CC933358