POACOSSA447

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

300006721443---4 -07/29/02--01040--021 *****87.50 *****87.50

SUBJECT: Advanced Plastic & Reconstructive Surgery, Inc.

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

□ \$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED
FROM: Advanced Plastic & Reconstructive Surgery E. M. Di Geronimo 19495 Biscayne Blvd Ste 200 Address			
	(305) 93	FL 33180 tate & Zip 2 - 5557 ephone number	2002 JUL 29 PN 2: 52 SLUNL TARY OF STATE TALLAHASSEE FLORIDI

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

of 1/30/02

ARTICLES OF INCORPORATION

OF

ADVANCED PLASTIC & RECONSTRUCTIVE SURGERY, INC2002 JUL 29 PM 2: 52

SECKETARY OF STATE TALLAHASSEE FLORIDA

ARTICLE I - NAME

The name of the corporation is ADVANCED PLASTIC & RECONSTRUCTIVE SURGERY, INC.

ARTICLE II - PRINCIPAL ADDRESS

The principal place of business and mailing address is: 19495 Biscayne Blvd., Suite 200, Aventura, FL 33180

ARTICLE III - PURPOSE

This corporation is organized for the purpose of transacting any and all lawful business authorized to corporations in Florida.

ARTICLE IV - SHARES

The number of shares of stock is 1,000 shares at \$.01.

ARTICLE V - REGISTERED AGENT

The name and address of the Registered Agent is:

Ernest M. DiGeronimo 19495 Biscayne Blvd., Suite 200 Aventura, FL 33180

<u>ARTICLE VI – INCORPORATOR</u>

The name and address of the Incorporator is:

Ernest M. DiGeronimo 19495 Biscayne Blvd., Suite 200 Aventura, FL 33180

Having been named as Registered Agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity.

Signature - Registered Agent

Signature - Incorporator