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#### Florida Department of State

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To:

Division of Corporations

Fax Number

; (850)205-0381

From:

Account Name

: EMPIRE CORPORATE KIT COMPANY

Account Number: 072450003255

: (305)634-3694

Fax Number

: (305)633-9696

#### FLORIDA PROFIT CORPORATION OR P.A.

ana m. alvarez jacinto, m.d., p.a.

Certificate of Status	0
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DEC

#### (4)

## # 02000233760 ARTICLES OF INCORPORATION

OF

#### ANA M. ALVAREZ JACINTO, M.D., P.A.

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

#### ARTICLE I NAME

The name of the corporation shall be: ANA M. ALVAREZ JACINTO, M.D., P.A.

#### **ARTICLE II DURATION**

This corporation should have perpetual existence.

#### ARTICLE III PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be: 2601 S.W. 37 Avenue #506, Coral Gables, FL 33133.

#### ARTICLE IV PURPOSE

The purpose of this corporation shall be: Medical Practice

#### ARTICLE V CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 100 shares common stock having an individual par value of \$1.00

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#### ARTICLE VI INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is: Vivian C. Rodriguez, P. A., 330 S.W. 27th Avenue, Suite #609, Miami, FL 33135.

#### ARTICLE VII BOARD OF DIRECTOR(S)

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

PRESIDENT
Ana M. Alvarez Jacinto

6835 S.W. 92 Street Miami, FL 33156

#### ARTICLE VIII INCORPORATOR(S)

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

EMPIRE CORPORATE KIT OF AMERICA, INC. 2444 NW 7th PLACE MIAMI, FL 33127

The undersigned has (have) executed these Articles of Incorporation this 5<sup>th</sup> day of DECEMBER 2002

NCORPORATOR

Ray Stormont Signing for

Empire Corporate Kit of America, Inc.

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### CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

ANA M. ALVAREZ JACINTO, M.D., P.A. (Name of Corporation)

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.

REGISTERED AGEN

Vivien C. Rodriguez, F.A.

TALLAHASSEE.FLORIDA

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