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Florida Department of State
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FLORIDA PROFIT CORPORATION OR P.A.

GABLES MED CENTER, INC

Certificate of Status	0
Certified Copy	1
Page Count	01
Estimated Charge	\$78.75

H02-239853

Articles of Incorporation

Article 1: Name of Corporation: **GABLES MED CENTER, INC**

Address of Corporation: **2101 SW 27 AVE.
MIAMI, FL. 33145**

Article 2: Capital Stock: The number of shares which the corporation has authorized to be outstanding at any one time is 5,000, with a par value of \$20.00.

Article 3: REGISTERED AGENT: **JAVIER FUENTES**

REGISTERED OFFICE: **2101 SW 27 AVE.
MIAMI, FL. 33145**

*I am familiar with and hereby accept the duties and responsibilities as Registered Agent for said corporation.



Signature of Registered Agent

Article 4: The Board of Directors are: (Board of Directors is NOT REQUIRED).
First listed is President, Second is Vice President, then Secretary/Treasurer.

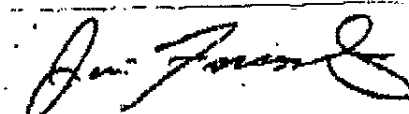
1. **JAVIER FUENTES 2101 SW 27 AVE. MIAMI, FL. 33145**

2.

3.

Article 5: The NAME and ADDRESS of the INCORPORATOR is:
**JAVIER FUENTES
2101 SW 27 AVE.
MIAMI, FL. 33145**

In witness whereof, I have subscribed my name:



Signature of Incorporator

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