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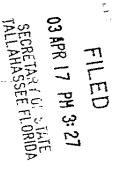
Division of Corporations

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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.

MEDICAL CENTER AT NORTHSIDE, INC.

D. WHITE APR 1 7 2003

Certificate of Status	0
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ARTICLES OF INCORPORATION OF

FILED

MEDICAL CENTER AT NORTHSIDE, INC.

03 APR 17 PH 3: 27

The undersigned incorporator(s), for the purpose of forming a corporation under the Floridal LAHASSEF FLORIDA General Corporation Act, hereby adopt(s) the following Articles of incorporation.

ARTICLE I NAME

The name of the corporation shall be: MEDICAL CENTER AT NORTHSIDE, INC.

The principal place of business of this corporation shall be:

7900 N.W. 27 AVENUE, SUITE 298 MIAMI, FL 33147

ARTICLE II NATURE OF BUSINESS

This corporation may engage in or transact any or all lawful activities or business permitted under the laws of the United States, the State of Florida, or any other state, country, territory or nation.

ARTICLE III CAPITAL STOCK

The aggregate number of shares of stock and its value that this corporation is authorized to have outstanding at any one time is:

1000 SHARES AT \$1.00 PAR VALUE

ARTICLE IV TERMS OF EXISTENCE

This corporation is to exist perpetually.

ARTICLE V OFFICERS DIRECTORS

The name(s) and street address(es) of the initial officer(s) and director(s), if any, who shall hold office the first year of the corporation's existence or until their successor(s) is (are) elected, is (are):

ROBERTA SCHULTE 7900 N.W. 27 AVENUE, SUITE 298 MIAMI, FL 33147

PREPARED BY:

STEFANELLI AND BATALLA CPA PA 14411 COMMERCE WAY, SUITE 310

MIAMI LAKES, FL 33016

(305) 557-0303

ARTICLE VI INCORPORATORIS

The name(*) and street address(cs) of the incorporator(s) to this articles of incorporation is (are):

ROBERTA SCHULTE 7900 N.W. 27 AVENUE, SUITE 298 MIAMI, FL 33147

IN WITNESS WHEREOF, the undersigned incorporator(s) has (have) executed these Art Incorporation this day of, 2005	icl es of
Signature(s) of Incorporator(s)	

FILED

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

03 APR 17 PM 3: 27

SECRETARY OF STATE Pursuant to the provisions of Section 607.325, Florida Statutes, the undersigned corporation ALLAHASSEE FLORIDA organized under the laws of the State of Florida, submits the following statement in designating the registered office-registered agent, in the State of Months. the registered office registered agent, in the State of Florida.

. The name address of the registered agent and office is: ROBERTA SCHULTE 7900 N.W. 27 AVENUE. SLITE 298 (P.O. BOX NOT ACCEPTABLE)	
7900 N.W. 27 AVENUE, SLITTE 298	
MIAMI_FL 33147	
(CITY/STATE/ZIP)	
SIGNATURE	rhha
DATE #-16-03	

PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607-325, FLORIDA STATUTES.