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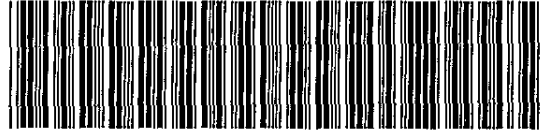
(Business Entity Name)

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RECEIVED
03 APR 22 AM 11:14
DIVISION OF CORPORATION
FILED
03 APR 22 PM 1:53
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

OFFICE USE ONLY(DOCUMENT #)

LAZARUS CORPORATE FILING SERVICE

3320 S.W. 87 AVENUE

MIAMI, FLORIDA (305)552-5973

TERESA ROMAN (TALLAHASSEE REPRESENTATIVE)

OFFICE USE ONLY

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. MEDICAL BUSINESS OF FLORIDA, CORP.
(Corporation Name) (Document #)

2. _____
(Corporation Name) (Document #)

3. _____
(Corporation Name) (Document #)

4. _____
(Corporation Name) (Document #)

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☒ Certified Copy

☐ Mail out ☐ Will wait

☐ Photocopy

☐ Certificate of Status

NEW FILINGS	
☒	Profit
☐	NonProfit
☐	Limited Liability
☐	Domestication
☐	Other

AMENDMENTS	
☐	Amendment
☐	Resignation of R.A., Officer/Director
☐	Change of Registered Agent
☐	Dissolution/Withdrawal
☐	Merger

OTHER FILINGS	
☐	Annual Report
☐	Fictitious Name
☐	Name Reservation

REGISTRATION/ QUALIFICATION	
☐	Foreign
☐	Limited Partnership
☐	Reinstatement
☐	Trademark
☐	Other

Examiner's Initials

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**CERTIFICATE OF INCORPORATION
MEDICAL BUSINESS OF FLORIDA, Corp.**

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We, the undersigned, hereby associate ourselves together for
The purpose of becoming a corporation under the laws of the
State of Florida. Providing for the formation, rights, privileges,
immunities and liabilities of Incorporation for profit.

ARTICLE I

The name of the corporation should be:

MEDICAL BUSINESS OF FLORIDA, CORP.

ARTICLE II

The corporation will engage in any activity or business
Permitted under the laws of the State of Florida and the
United States of America.

ARTICLE III

The maximum number of shares, which the corporation is
Authorize to issue and have outstanding at any one time is
100 shares of common stock, which shares shall be of no par
Value. All stock is to be issued as fully paid and exempt from
Assessment.

ARTICLE IV

The pledge, sale, transfer or other disposition of the
Capital stock may be governed and restricted by the by-laws
Or written agreement among the stockholders which shall be
On file in the office of the corporation.

ARTICLE V

The amount of capital with which its corporation may begin
Doing business shall be not less than five hundred dollars
(\$500.00).

ARTICLE VI

The existence of the corporation is perpetual.

ARTICLE VII

The initial post office address of the principal office of Corporation in the State of Florida is: **23 PHONETIA AVE STE 4, CORAL GABLES, FL 33134.**

The board of directors may from time to time move the Principal office to any other address in the State of Florida. The registered address of the corporation is: **23 PHONETIA AVE STE 4, CORAL GABLES, FL 33134.** Registered agent at the address is **EDDY CORREA.**

ARTICLE VIII

A board shall manage the business of the corporation Of directors consisting of no less than one and no more than Five directors. A quorum for the holding of a meeting of The board of directors and for the transactions of any Business, which will be properly done by the directors on Behalf of the corporation shall consist of majority of Members thereof; but the directors, by unanimous consent in Writing, included among the minutes of the corporation, may Consent to the doing of any act and such consent in writing Shall have the same force and effect as though the said act Had been done and authorized at a meeting at which a quorum Had been present, or such duties may be delegated to an Executive committee.

ARTICLE IX

The names and post office of the members of the first board
Of directors and the slate of corporate officers

EDDY CORREA
PRESIDENT

PHONETIA AVE STE 4
MIAMI, FL 33134

Stock of the corporation may be issued pursuant
To the provisions of section 1244 of the Internal Revenue Service
Code, so that the stockholders of the Corporation may receive
The benefits provided hereunder.

In witness whereof, we have hereunto set our hands and
Seals, this April 16, 2003.



EDDY CORREA
23 PHONETIA AVE STE 4
CORAL GABLES, FL 33134

CERTIFICATE DESIGNATING PLACE OF BUSINESS OR
DOMICILE FOR THE SERVICE OF PROCESS WITHIN
FLORIDA, NAMING AGENT UPON WHOM PROCESS MAY
BE SERVED.

Pursuant to the provisions of the section 607.0501, Florida
Statutes, the undersigned corporation, organized under the
Laws of the State of Florida.

The name of the corporation is, **MEDICAL BUSINESS OF FLORIDA,
Corp** certify under the laws of the State of Florida, with its principal
place of business at , City of Miami, State of Florida **named EDDY
CORREA** as agent to accept process in State of Florida County of
Miami-Dade.

Having been named as registered agent and to accept service
Of process for the above stated corporation at the place
Designated in this certificate, 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.



EDDY CORREA
REGISTERED AGENT

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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