

PO300005826

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

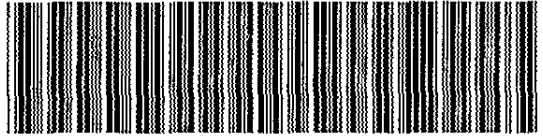
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700019161087

FILED

03 MAY 27 PM 12: 15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED

03 MAY 27 AM 10: 32
DEPARTMENT OF STATE
DIVISION OF REGISTRATION
TALLAHASSEE, FLORIDA

✓

128



CORPORATION SERVICE COMPANY™

ACCOUNT NO. : 072100000032

REFERENCE : 106811 81624A

AUTHORIZATION :

COST LIMIT : \$ 87.50

Patricia Pizots

ORDER DATE : May 27, 2003

ORDER TIME : 10:13 AM

ORDER NO. : 106811-005

CUSTOMER NO: 81624A

CUSTOMER: Ms. Michelle S. Garcia-rivera
J. Patrick Fitzgerald, Pa

Suite 3-b
110 Merrick Way
Coral Gables, FL 33134

DOMESTIC FILING

NAME: CARLOS A. GARCIA-RIVERA, D.O.,
P.A.

EFFECTIVE DATE:

XX ARTICLES OF INCORPORATION
 CERTIFICATE OF LIMITED PARTNERSHIP
 ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY
 PLAIN STAMPED COPY
XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Susie Knight - EXT. 1156

EXAMINER'S INITIALS: _____



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

May 27, 2003

CSC

RESUBMIT

Please give original
submission date as file date.

SUBJECT: CARLOS A. GARCIA-RIVERA, D.O.
Ref. Number: W03000014994

We have received your document for CARLOS A. GARCIA-RIVERA, D.O. and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of the entity must be identical throughout the document.

The specific nature of business of the professional association must be stated in the document.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6067.

Neysa Culligan
Document Specialist
New Filings Section

Letter Number: 803A00033259

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

03 MAY 28 AM 9:47

RECEIVED

FILED

03 MAY 27 PM 12:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES

OF

INCORPORATION OF

**CARLOS A. GARCIA-RIVERA, D.O., P.A.
A PROFESSIONAL ASSOCIATION**

The undersigned, for the purpose of forming a for-profit professional association under the Florida General Corporation Act, hereby makes, subscribes, acknowledges and files the following Articles of Incorporation:

ARTICLE I

NAME

The name of this professional association is CARLOS A. GARCIA-RIVERA, D.O., P.A., a Florida professional association, and its principal office is located at 11880 S.W. 40 Street, Suite 218, Miami, Florida 33175.

ARTICLE II

PURPOSE

This professional association is organized for the purpose of operating a medical practice in neurology and transacting any and all lawful business permitted under the laws of Florida.

ARTICLE III

TERM OF EXISTENCE

This professional association shall have a perpetual existence.

ARTICLE IV

CAPITAL STOCK

This professional association is authorized to issue 1000 shares of common stock with a par value of \$1.00.

ARTICLE V

PREEMPTIVE RIGHTS

Every shareholder, upon the sale for cash of any new common stock of this professional association shall have the right to purchase his pro rata share (as nearly as may be done without issuance of fractional shares) at the price at which it is offered to others.

ARTICLE VI

REGISTERED OFFICE AND AGENT

The street address of the registered office of this professional association and the name of the registered agent of this professional association is Carlos A. Garcia-Rivera, D.O., 11880 SW 40th Street, Suite 218, Miami, Florida 33175.

ARTICLE VII

BOARD OF DIRECTORS

This professional association shall have one (1) director initially. The number of directors may be either increased or diminished from time to time as prescribed by the bylaws, but shall never be less than one (1). The initial directors of this professional association are:

Carlos A. Garcia-Rivera, D.O.
11880 SW 40 St., Suite 218
Miami, Florida 33175

ARTICLE VIII

OFFICERS

The professional association shall have a President, a Secretary, and a Treasurer and may have additional and assistant officers including, without limitation thereto, one or more Vice Presidents, Assistant Secretaries, and Assistant Treasurers. A person may hold more than one office at one time. Such officers shall be elected by the Board of Directors.

The Board may remove any or all of the officers from office, with or without cause, and at such time as the Board may determine. The names and addresses and positions of the persons who serve as the initial officers of the professional association are as follows:

Carlos A. Garcia-Rivera, D.O.	P/Tr/Sec	11880 S.W. 40 Street, Suite 218 Miami, Florida 33175
-------------------------------	----------	--

ARTICLE IX

INCORPORATOR

The name and address of the person signing these articles is: Carlos A. Garcia-Rivera, D.O., 11880 S.W. 40 St., Suite 218, Miami, Florida 33175.

ARTICLE X

INDEMNIFICATION

The professional association shall indemnify any officer or director or any former officer or director, to the full extent permitted by law.

ARTICLE XI

BYLAWS

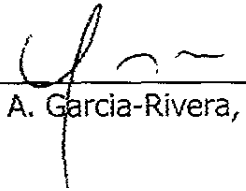
The Bylaws may be repealed or amended, and new Bylaws may be adopted, by either the Board of Directors or the Stockholders, but the Board of Directors may not amend or repeal any Bylaw adopted by Stockholders if the Stockholders specifically provide such Bylaw is not subject to amendment or repeal by the Directors.

ARTICLE XII

AMENDMENT OF THE ARTICLES OF INCORPORATION

These articles may be amended, altered, modified or revoked only upon the vote of the majority of the shareholders.

IN WITNESS WHEREOF, I have subscribed my name this 20 day of May, 2003.



Carlos A. Garcia-Rivera, D.O.

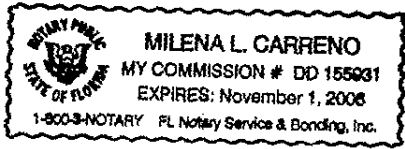
STATE OF FLORIDA)
) SS:
COUNTY OF Miami-Dade)

The foregoing instrument was acknowledged before me this 20 day of May, 2003, by Carlos A. Garcia-Rivera, D.O., as Incorporator of Carlos A. Garcia-Rivera, D.O., P.A., a Florida professional association, on behalf of the professional association. He is personally known to me or has produced _____ as identification.



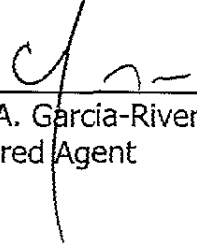
NOTARY PUBLIC-STATE OF FLORIDA
At Large

My Commission Expires:



ACCEPTANCE BY REGISTERED AGENT

Having been named to accept service of process of the above-styled professional association, at the office stated above, I hereby accept to act in the capacity of Registered Agent and agree to comply with the provisions relative to keeping said office open.



Carlos A. Garcia-Rivera, D.O.
Registered Agent

FILED
03 MAY 27 PM 12:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA