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CORPORATION NAME(S) & I	OCUMENT NUMB		·
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NEW FILINGS	Amendment	N15	I: 30 LORIDA
Profit NonProfit	Resignation of R.	A Officer/Director	
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Other	Merger		
OTHER FILINGS	REGISTRATION		
Annual Report	QUALIFICATION		
Fictitious Name	Foreign		
Name Reservation	Limited Partnershi	p	
	Reinstatement		
	Trademark		
	Other	Framing	r's Initials

Examiner's Initials

ARTICLES OF INCORPORATION

The undersigned Incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE 1 - NAME

The name of the corporation shall be:

LINLIMITED MEDICAL

AssociAtiON INC

ARTICLE II - PRINCIPAL OFFICE

The principal place of business and mailing of this corporation shall be:

3130 CORAL WAY Miami, FL 33145 O4 JAN -7 PN 1:39
SECRE STATE
TALLANASSEE: SLORIDA

ARTICLE III -SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 100

ARTICLES IV -INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

ORESTES FERNÁNDEZ 3130 CORAL WAY MIAMID FZ. 33145

ARTICLE V - INCORPORATOR

The name and street address of the incorporator to these Articles of Incorporation is: ORESTES FERNANCEZ 3130 CORAL WAY MIAMI, FZ 33145
The undersigned incorporator has executed these Articles of
Incorporation this _a day of January 20 04
Signature
ARTICLE VI- DIRECTOR(S) ARTICLE VI- DIRECTOR(S) ARTICLE VI- DIRECTOR(S)
The name(s) and street address(es) of the director(s) to these
Articles of Incorporation is (are):
ORESTES FERNANDEZ PRESIDENT
Articles of Incorporation is (are): ORESTES FERNANDEZ PRESIDENT JOSE ANADO PEREZ - VICE PRESIDENT 3130 CORAL WAY MIAMI, FL. 33145
3130 CORAL WAY
MIAMI, FL. 33145
, -

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT / REGISTERED OFFICE

Having been named as Registered Agent and to accept service of process for the above stated corporation at 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 related 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 Agent Signature