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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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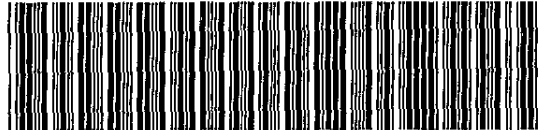
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TALLAHASSEE, FLORIDA

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2/6/4

Dunkley & ASSOC.

Requestor's Name

14100 Palmetto Fountains Rd.

Address

Miami Lakes, FL 33016 #201

City

State

ZIP

Phone

CORPORATION(S) NAME

Calbo medical Center, Inc.

☒ Profit

☐ NonProfit

☐ Amendment

☐ Merger

☐ Foreign

☐ Dissolution

☐ Mark

☐ Limited Partnership

☐ Annual Report

☐ Other

☐ Reinstatement

☐ Reservation

☐ Change of Registered Agent

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION

OF

Calbo Medical Center, Inc.

ARTICLE I - NAME

The name of the corporation is Calbo Medical Center, Inc.

ARTICLE II - DURATION

This Corporation is to exist perpetually.

ARTICLE III - PURPOSE

This Corporation is organized to engage in any act or business permitted under the laws of the United States of America and the State of Florida.

ARTICLE IV - CAPITAL STOCK

This corporation is authorized to issue 7,500 shares of common stock with a par value of one dollar (\$1.00) per share.

#### ARTICLE V - PREEMPTIVE RIGHTS

Every, shareholder, upon the sale for cash of any new stock of this corporation of the same kind, class or series as that which he already holds shall have the right to purchase his prorata share thereof (as nearly as may be done without issuance of fractional shares) at the price at which it is offered to others..

#### ARTICLE VI - INITIAL REGISTERED OFFICE AND AGENTS

The street address of the initial registered office and principle place of business of this corporation is 1355 West 53 st # 202 Hialeah, Florida 33012 and the name of the initial registered agent of this corporation at that address is Lindsay Dunkley.

## ARTICLE VII - INITIAL BOARD OF DIRECTORS

This corporation shall have Two (2) director initially.

The number of directors may either be increased or diminished from time to time by the bylaws, but shall never be less than one (1).

the name and address of the initial director of this corporation is:

NAME

ADDRESS

Adolfo Calbo  
President

1355 West 53rd St # 202  
Hialeah, Florida 33012

## ARTICLE VIII - INCORPORATOR

The name and address of the incorporator is:

NAME

ADDRESS

Lindsay Dunkley

1355 West 53rd St # 202  
Hialeah, Florida 33012

#### ARTICLE IX - BYLAWS

The power to adopt, alter, amend or repeal bylaws shall be vested in the board of directors.


#### ARTICLE X - INDEMNIFICATION

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

#### ARTICLE XI - AMENDMENT

This corporation reserves the right to amend or repeal any provisions contained in these Articles of Incorporation, or any amendment thereof, and any right conferred upon the shareholders is subject to this reservation.

Executed by the undersigned Incorporator this 06th, day of  
February 2004.

  
\_\_\_\_\_  
Lindsay Dunkley

STATE OF FLORIDA )  
                          : SS  
COUNTY OF DADE    )

The foregoing Articles of Incorporation was acknowledged before me  
this 06th day of February, 2004, by Lindsay Dunkley.

\_\_\_\_\_  
NOTARY PUBLIC  
State of Florida at Large

My Commission Expires:

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

IN COMPLIANCE WITH SECTION 48.091, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED;

FIRST: THAT CALBO MEDICAL CENTER, INC. DESIRING TO ORGANIZE OR QUALIFY UNDER THE LAWS OF THE STATE OF FLORIDA, WITH IT'S PRINCIPAL PLACE OF BUSINESS AT COUNTY OF DADE, STATE OF FLORIDA, HAS NAMED LINDSAY DUNKLEY AT 1355 WEST 53RD ST. # 202 HIALEAH, FLORIDA 33012 AS ITS AGENT TO ACCEPT SERVICES OF PROCESS WITHIN FLORIDA.

SIGNATURE:

A handwritten signature, appearing to be 'LD', is written over a horizontal line.

LINDSAY DUNKLEY

TITLE: INCORPORATOR

DATE: FEBRUARY 06, 2004



HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE  
STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I  
HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY  
WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND  
COMPLETE PERFORMANCE OF MY DUTIES.

SIGNATURE:



LINDSAY DUNKLEY

DATE: FEBRUARY 06, 2004

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2004 FEB 23  
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TALLAHASSEE, FLORIDA