

Division of Corporations

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850)205-0381

From:

Account Name : INCORPORATETIME.COM, INC.
Account Number : I19990000221
Phone : (631)218-1510
Fax Number : (631)589-2848

FLORIDA PROFIT CORPORATION OR P.A.

Miami Dade Pain & Laser Institute Inc

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$70.00

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ARTICLES OF INCORPORATION

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TALLAHASSEE, FLORIDA

THE UNDERSIGNED INCORPORATION FOR THE PURPOSE OF FORMING A CORPORATION UNDER THE FLORIDA BUSINESS CORPORATION ACT, HEREBY ADOPTS THE FOLLOWING ARTICLES OF INCORPORATION.

ARTICLE I -NAME

THE NAME OF THE CORPORATION SHALL BE:

Miami Dade Pain & Laser Institute Inc

ARTICLE II -PRINCIPAL OFFICE

The principal place of business & mailing address of this corporation shall be

8498 SW 8 St
Miami, FL 33144

ARTICLE III -SHARES

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

1000 shares at \$1.00 par value

ARTICLE IV -INITIAL OFFICERS/DIRECTORS:

President/Director: Amaro Exposito
2725 SW 114 Ave, Miami, FL 33165

Vice President/Director: Ernesto Montaner
1901 NW 17 Ave, Miami, FL 33131

ARTICLE V -INITIAL REGISTERED AGENT AND STREET ADDRESS:

The name and Florida street address of the initial registered agent are:

Fernando Martinez
14631 Balgowan Rd, #203
Miami Lakes, FL 33016

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ARTICLE VI INCORPORATOR:

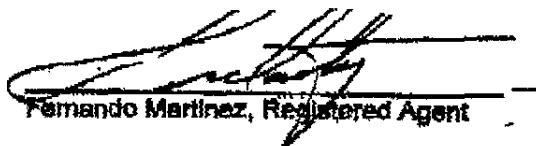
The name and address of the Incorporator to these Articles of Incorporation are:

Fernando Martinez
14531 Balgowan Rd, #203
Miami Lakes, FL 33016


Fernando Martinez, Incorporator

5/12/07
Date

Having been named registered agent and to accept service of process for the above stated corporation as 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.


Fernando Martinez, Registered Agent

5/12/07
Date

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