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From:

Account Name : FAS-T CORP. AGENTS, INC.

Account Number : 071001002335 : (305)599-0839 Phone Phone Fax Number

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FLORIDA PROFIT CORPORATION OR P.A.

BASILIO GARCIA ANESTILESIA SERVICES, P.A.

Certificate of Status	0
Certified Copy	1
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ARTICLES OF INCORPORATION OF BASILIO GARCIA ANIESTHESIA SERVICES, P.A.

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida General Corporation Act, hereby adopt(s) the following Articles of incorporation.

ARTICLE LNAME

The name of the corporation shall be: Basilio Garcia Anesthesia Services, P.A.

The principal place of business of this corporation shall be: 10985 SW 26th St. Miami, FL 33165



ARTICLE II NATURE OF BUSINESS

To provide medical (anesthesia) and consulting services.

ARTICLE III CAPITAL STOCK

The aggregate number of shares of stock and its value that this corporation is authorized to have outstanding at any one time is:

1000 shares, common stock, \$1.00 par value

ARTICLE IV TERM OF EXISTENCE

This corporation is to exist perpetually.

ARTICLE V OFFICERS DIRECTORS

The name(s) and street address(es) of the initial officer(s) and director(s), if any, who shall hold office the first year of the corporation's existence or until their successor(s) is(are) elected, is(are):

NAME_	TITLE	ADDRESS
Basilio Garcia	President/Director	10985 SW 26th St
		Miami, FL 33165
Carie Cancio	Vice Pres/Director	10985 SW 26th St
	,	Miami, FL 33165

ARTICLE VI INCORPORATORS

The name(s) and street address(s) of the incorporator(s) to this articles of incorporation is (are)

NAME		ADDRESS
Basilio Garcia	÷ .	10985 SW 25th St
·		Miami, Fl. 33165

IN WITNESS WHERE OF, the undersigned incorporator(s) has(have) executed these Articles of Incorporation this 20th day of July, 2004.

Signature(s) of Incorporator(s)

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section 607.0501, Florida Statutes, the undersigned corporation, organizes under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. The name of the corporation is: Basilio Garcia Anesthesia Services, P.A.

The name and address of the registered agent and office is: Sergio de Varona. CPA, 304 Palermo Avenue, Coral Gables, FL 33134

Signature_

Date 7./20/04

Ilaving 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 the statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent.