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Florida Department of State  
Division of Corporations  
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To:  
Division of Corporations  
Fax Number : (850) 205-0381

From:  
Account Name : JOEL SANDERS & COMPANY, PA  
Account Number : I20040000032  
Phone : (954) 385-9290  
Fax Number : (954) 385-9284

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SECTION  
DIVISION

FLORIDA PROFIT CORPORATION OR P.A.

ETHAN HEIT, M.D., P.A.

Certificate of Status	0
Certified Copy	1
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**ARTICLES OF INCORPORATION**

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

**ARTICLE I NAME**

The name of the corporation shall be:

ETHAN HEIT, M.D., P.A.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/ mailing address is:

1282 NW 141 AVENUE  
PEMBROKE PINES, FL 33028

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: PHYSICIAN

**ARTICLE IV SHARES**

The number of shares of stock is: 1,000

**ARTICLE V INITIAL OFFICERS/DIRECTORS (Optional)**

The name(s) and address(es):

ETHAN D. HEIT - PRESIDENT  
1282 NW 141 AVENUE  
PEMBROKE PINES, FL 33028

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address of the registered agent is:



ETHAN D. HEIT  
1282 NW 141 AVENUE  
PEMBROKE PINES, FL 33028

**ARTICLE V INCORPORATOR**

The name and address of the incorporator is:

ETHAN D. HEIT  
1282 NW 141 AVENUE  
PEMBROKE PINES, FL 33028

\*\*\*\*\*  
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity.

	3/27/04
Signature/Registered Agent	Date
	3/27/04
Signature/Incorporator	Date

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