Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H04000160366 3)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)205-0381

From:

Account Name : EMPIRE CORPORATE KIT COM

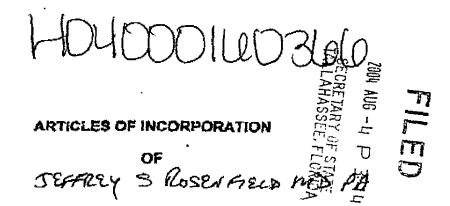
Account Number: 072450003255

Phone : (305)634-3694 Fax Number : (305)633-9696

FLORIDA PROFIT CORPORATION OR P.A.

jeffrey s rosenfield md pa

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$78.75



The undersigned incorporator(s), for the purpose of forming a Professional Service Corporation under Chapter 621 of the Florida Statutes, hereby adapt(s) the following Articles of Incorporation.

ARTICLE L NAME

The name of the corporation shall be:

JEFFREY S ROSENFIELD MD PA.

ARTICLE II DURATION

This corporation should have perpetual existence.

ARTICLE III PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be: Zo952 DELAGADO TERRACE BOCA RATON FE 33433

ARTICLE IV PURPOSE

The purpose of this corporation shall be: MEDICAL SERVICES!
PHYSICIAN

ARTICLE V CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: ______ shares having an individual par value of \$ _____ o !

1

H04000160366

ARTICLE VI INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:

JEFFREY S ROSENFIELD 20952 DELAGADO TERR BOCA RATON FE 33433

ARTICLE VILBOARD OF DIRECTOR(S)

The name and address of the initial board of directors shall be:

JEFFREY S ROSENFIELD 20952 DELAGADO TERR BOCA RATION FE 33413

ARTICLE VIII INCORPORATOR(S)

The name and address of the incorporator(s) to these Articles of incorporation shall be:

BOCA RAYON FE 33433

The undersigned has (have) executed these Articles of Incorporation this ______ day of ______ 20 0/2

NCORPORATOR

H0400011e031eco

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

JEARLY S RASENATED MD PA
(Name of Corporation)

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THE ARTICLES OF INCORPORATION, 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.

REGISTERED AGENT

ZOON AUG -4 P 3 14
SECRETARY OF STATE

2

H04000160366