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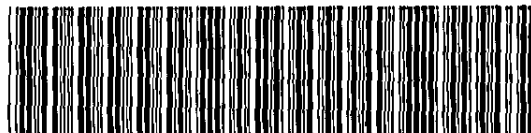
(Business Entity Name)

(Document Number)

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OFFICE USE ONLY(DOCUMENT #)

LAZARUS CORPORATE FILING SERVICE

3320 S.W. 87 AVENUE

MIAMI, FLORIDA (305)552-5973

OFFICE USE ONLY

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. SOUTH MIAMI HEALTH, INC.
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

☒ Walk in ☒ Pick up time 2.00

☐ Certified Copy.

☐ Mail out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

NEW FILINGS	
<input checked="" type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

Examiner's Initials

**CERTIFICATE OF INCORPORATION
OF
SOUTH MIAMI HEALTH, INC.**

We, the undersigned, hereby associate ourselves together for the purpose of becoming a corporation under the laws of the State of Florida. Providing for the formation, rights, privileges, immunities and liabilities of Incorporation for profit.

ARTICLE I

The name of the corporation should be:

SOUTH MIAMI HEALTH, INC.

ARTICLE II

The corporation will engage in any activity or business permitted under the laws of the State of Florida and the United States of America.

ARTICLE III

The maximum number of shares which the corporation is Authorized to issue and have outstanding at any one time is 100 shares of common stock, which shares shall be of no par Value. All stock is to be issued as fully paid and exempt from Assessment.

ARTICLE IV

The pledge, sale, transfer or other disposition of the capital stock may be governed and restricted by the by-laws or written agreement among the stockholders which shall be on file in the office of the corporation.

FILED
JUN 21 1961
CLERK OF THE CIRCUIT COURT
IN AND FOR THE COUNTY OF DADE
FLORIDA

ARTICLE V

The amount of capital with which its corporation may begin doing business shall be not less than five hundred dollars (\$500.00).

ARTICLE VI

The existence of the corporation is perpetual.

ARTICLE VII

The initial post office address of the principal office of corporation in the State of Florida is : **5995 SW 71 STREET SUITE 3B, SOUTH MIAMI, FLORIDA 33143 .**

The board of directors may from time to time move the principal office to any other address in the State of Florida.
The registered address of the corporation is: **5995 SW 71 STREET SUITE 3B, SOUTH MIAMI, FLORIDA 33143** and the registered agent at the address is **ELOY MARIN.**

ARTICLE VIII

The business of the corporation shall be managed by a board of directors consisting of no less than one nor more than five directors. A quorum for the holding of a meeting of the board of directors and for the transactions of any business which will be properly done by the directors on behalf of the corporation shall consist of majority of members thereof; but the directors, by unanimous consent in writing, included among the minutes of the corporation, may consent to the doing of any act and such consent in writing shall have the same force and effect as though the said act had been done and authorized at a meeting at which a quorum had been present, or such duties may be delegated to an executive committee.

ARTICLE IX


The names and post office of the members of the first board of directors and the slate of corporate officers are as follows:

**ELOY MARIN
PRESIDENT**

**5995 SW 71 STREET 3B
MIAMI, FLORIDA 33143**

Stock of the corporation may be issued pursuant to the Provisions of section 1244 of the Internal Revenue Service Code, so that the stockholders of the Corporation may receive the benefits provided thereunder.

In witness whereof, we have hereunto set our hands and Seals this February 25TH, 2005


**ELOY MARIN
5995 SW 71 STREET SUITE 3B
SOUTH MIAMI, FL 33143**

CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE
FOR THE SERVICE OF PROCESS WITHIN

FLORIDA, NAMING AGENT UPON WHOM PROCESS MAY
BE SERVED.

Pursuant to the provisions of the section 607.0501, Florida
Statutes, the undersigned corporation, organized under the
Laws of the State of Florida.

the name of the corporation is: **SOUTH MIAMI HEALTH, INC.** with its
principal place of business at City of Miami, State of Florida has named
ELOY MARIN located at **5995 SW 71 STREET SUITE 3B.** as agent to
accept process in State of Florida County of **Miami-Dade.**

Having 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 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.



ELOY MARIN
REGISTERED AGENT

FILED