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To:

Division of Corporations

: (850)205-0381 Fax Number

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

Account Number : 071001002335 Phone

: (305)599-0839 Fax Number : (305)716-0346

FLORIDA PROFIT CORPORATION OR P.A.

DASTAGIR A KHAN M.D., P.A.

Certificate of Status	0
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ARTICLES OF INCORPORATION OF

DASTAGIR A KIAN M.D., 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 L NAME

The name of the corporation shall be: DASTAGRA RIAN M.D., P.A.

The principal place of business of this corporation shall be: 4524 gm aus ROAD, # 102, WEST BALM BEACH, NL 334L5

ARTICLE II NATURE OF BUSINESS

This corporation may engage in or transact any or all lawful activities or business permitted under the laws of the United States, the State of Florida, or any other state, country, territory or nation. THE MAIN ACTIVITY WILL BE A MEDICAL PRACTICE AS A LICENSED INTERNET, HAVING AN OFFICE FOR INTERNAL MEDICINE.

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: 500 SHRES OF \$ 1.00 PACE.

ARTICLE IV TERM OF EXISTENCE

This corporation is to exist perpetually.

ARTICLE Y 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):

DASTAGIR A KHAN 4524 CIN CLUB ROAD, # 102, WEST HALM BEACH, FL 33415

ARTICLE VI INCORPORATORISI

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

DASTAGTR A KHAN 4524 CHN CLUB NOAD, # 102, WEST PALM BEACH, RL 33415

IN WITNESS WHEREOF, the undersigned incorporator(s) has (have) executed these Articles of incorporation this, 11TH day of MRCH, 2005

Signature(s) of Incorporator(s)

Pursuant to the provisions of Section 607.325, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

•	The		- # A La -		
Ŧ	. III	name	or top	carp	oration:
•		, , , , , , , , , , , , , , , , , , , ,			~ , ~ , , ~ , , ,

DASTACIR A KIAN M.D., P.A.

2. The name and address of the registered agent and office is:

DASTAGRA RIAN 4524 GUN CLUB ROAD, #102

[P.O. BOX NOT ACCEPTABLE]

WEST BALM REACH, FLORIDA 334,5
(CITY/STATE/ZIP)

SIGNATURÉ

TITLE INCORPORATOR/PRESIDENT

DATE March 11,2005

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325, FLORIDA STATUTES.

DATE

March 11, 2005

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