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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 : XIOMARA LEE, P.A.
Account Number : I200400000008
Phone : (305) 262-2323
Fax Number : (305) 262-2324

05 MAY 18 AM 10:37
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
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FLORIDA PROFIT CORPORATION OR P.A.

MAYTE FERNANDEZ P.A.

Certificate of Status	1
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05 MAY 18 AM 10:37

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

MAYTE FERNANDEZ P.A.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

6654 NW 177 TERR
MIAMI, FL 33015

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

MEDICAL AND HEALTH SERVICES

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

MAYTE FERNANDEZ (PRESIDENT/DIRECTOR)
6654 NW 177 TERR
MIAMI, FL 33015

LEONEL DIAZ (VICEPRESIDENT/DIRECTOR)
6654 NW 177 TERR
MIAMI, FL 33015

ARTICLE VI REGISTERED AGENT

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

MAYTE FERNANDEZ
6654 NW 177 TERR
MIAMI, FL 33015

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

MAYTE FERNANDEZ
6654 NW 177 TERR
MIAMI, FL 33015

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

x Mayte Fernandez
Signature/Registered Agent

05/18/2005

Date

x Mayte Fernandez
Signature/Incorporator

05/18/2005

Date

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