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CORPORATION NAME(S) & DOCUME	NT NUMBER	(S), (if kr	iowa):			
1. ALL FLORIDA MED (Corporation Name)	DICAL (ENTE ni#)	R, INC	•		
2(Corporation Name)	(Docume	nt #)	·			
3 (Corporation Name)	(Docume	nt #)				
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OTHER FILINGS	REGISTRAT	SISTRATION/QUALIFICATION				
 Annual Report Fictitious Name 	 Foreign Limited Pa Reinstaten Trademark Other 	nent				
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CR2E031(7/97)

Examiner's Initials

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ARTICLES OF INCORPORATION

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The undersigned Incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I - NAME

The name of the corporation shall be:

All FLORIDA HEDICAL CENTER, FNC.

ARTICLE II - PRINCIPAL OFFICE

The principal place of business and mailing of this corporation shall be:

901-A SW 87 AVE

MIANI FL 33174

ARTICLE III -SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

100

ARTICLES IV -INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

CESAR DELEON 901-A SW 87 AVE MIAMI FL 33174

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ARTICLE V - INCORPORATOR

TALLAHASSEE. I LA

The name and street address of the incorporator to these Articles of Incorporation is:

CESAR DELEON 6861 Cobia Circle BOYNTON BEACH, FL 33437

The undersigned incorporator has executed these Articles of Incorporation this 2005 day of 2005

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ARTICLE VI- DIRECTOR(S)

The name(s) and street address(es) of the director(s) to these Articles of Incorporation is (are):

CESAR DELEON, MD 6861 Cobia Circle BOYNTON BEACH FLORIDA 33437 PRESIDENT

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT / REGISTERED OFFICE

Having been named as Registered Agent and to accept service of process for the above stated corporation at 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 related 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 Signature