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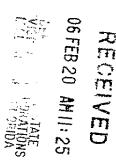
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CORPORATE FILING SERVICE 3320 SW 87TH AVENUE MIAMI, FL 33165 (305) 552-5973 Office Use Only CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) Pick up time _2 ,8 6 Walk in Certified Copy ☐ Photocopy Certificate of Status Mail out ☐ Will wait **AMENDMENTS NEW FILINGS** Profit Amendment Resignation of R.A., Officer/Director Not for Profit Change of Registered Agent Limited Liability Dissolution/Withdrawal Domestication Merger Other REGISTRATION/QUALIFICATION **OTHER FILINGS** Foreign Annual Report Fictitious Name Limited Partnership Reinstatement Trademark Other

Examiner's Initials

ARTICLES OF INCORPORATION

B.D. P.A.-C., INC.

(name of corporation)

The undersigned subscriber(s) to these Articles of Incorporation, natural person(s) competent to contract, hereby form a corporation under the laws of the State of Florida.

ARTICLE I -CORPORATE NAME

The name of the corporation is:

B.D. P.A.-C., INC.

ARTICLE II-DURATION

This corporation shall exist perpetually unless dissolved according to Florida law.

ARTICLE III-PURPOSE

The corporation is organized for the purpose of engaging in any activities or business permitted under the laws of the United State and the State of Florida.

ARTICLE IV-CAPITAL STOCK

The corporation is authorized to issue One hundred shares(100)of Five..... Dollar(s) (\$ 5.00)par value Common Stock, which shall be designated "Common Shares

ARTICLE V-INITIAL REGISTERED OFFICE AND AGENT

The principal office, if known, or the mailing address of the corporation is :

BARBARA A. DIAZ NAME: 19359 NW 45TH Ave. ADDRESS

MIAMI GARDENS. STATE: FLORIDA ZIP 33055 CITY: The name and street address of the Initial Registered Agent of this Corporation is:

BARBARA A. DIAZ NAME: ADDRESS: 19359 NW 45th Ave.

MIAMI GARDENS STATE: FLORIDA ZIP: 33055 CITY:

ARTICLE VI- INITIAL BOARD OF DIRECTORS

This corporation shall have One (1) directors initially. The number of directors may be either increased or diminished from time to time by the By-Laws, but shall never be less than one(1). The names and address of the initial director(s) of the corporation are as follows:

BARBARA A. DIAZ NAME:

TITLE: PRESIDENT, SECRETARY AND

TREASURY

ADDRESS: 19359 NW 45TH Ave.

MIAMI GARDENS CITY:

STATE: FLORIDA ZIP: 33055

ARTICLE VII - INCORPORATORS

The names and address of the incorporators signing these Articles of Incorporation are as

follows:

NAME: ADDRESS: Barbara A. Diaz

19359 NW 45th Ave.

CITY: Miami Gardens

TITLE: President, Secretary and Treasury

(Seal)

Florida ZIP: 33055 STATE:

IN WITNESS WHEREOF, the undersigned subscriber(s) have executed these Articles of

Incorporation this 15 Day of February , 2006

₿arbara A. Diaz

STATE OF FLORIDA

SS

COUNTY OF DADE

before me, a Notary Public authorized to take acknowledgements in the State and County set forth above, personally appeared BARBARA A. DIAZ Known to me and known to be the person(s) who executed the foregoing Articles of Incorporation, and who acknowledged before me that executed these Articles of Incorporation.

IN WITNESS WHEREOF, I have hereunto affixed my hand and seal, in the State and County aforesaid, this 15 day of February, 2006

(Notary Seal)

Public, State of Florida at Large)

My Commission expires:



CERTIFICATE AND ACKNOWLEDGEMENT OF REGISTERED AGENT

CERTIFICATE OF REGISTERED AGENT

OF

B.D. P.A.-C., INC.

(Name of corporation)

Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted: The above corporation, desiring to organize under the laws of the State of Florida with its registered office as indicated in the Articles of Incorporation

at:

Miami, FL.

has named: Barbara A. Diaz located at the aforesaid address, as its Registered Agent to accept service of process within this state.

ACKNOWLEDGEMENT

Having been named as Registered Agent to accept service of process for the above stated corporation at the place designated in this certificate, and being familiar with the obligations of that position, I hereby accept to act in jthis capacity, and agree to comply with the provisions of Florida Law in keeping open said office.

(Registered Agent)