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To: Division of Corporations
Fax Number : (850) 205-0381

From: Account Name : FAS-T CORP. AGENTS, INC.
Account Number : 071001002335
Phone : (305) 599-0839
Fax Number : (305) 716-0346

FLORIDA PROFIT/NON PROFIT CORPORATION

MICHAEL A. CAMPOS, M.D., P.A.

Certificate of Status	0
Certified Copy	1
Page Count	03
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March 27, 2006

FLORIDA DEPARTMENT OF STATE
Division of Corporations

FAS-T CORP AGENTS

SUBJECT: MICHAEL A. CAMPOS, M.D., P.A.
REF: W06000014557

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*SEE
Article II
"MEDICAL
SERVICES"
Thanks!
Vivian*

ARTICLES OF INCORPORATION
OF

Michael A Campos, M.D., P.A.

The undersigned incorporation, for the purpose of forming a corporation under the Florida General Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

Michael A. Campos, M.D., P.A.

The principal place of business of this corporation shall be:

6039 Collins Avenue #1007
Miami Beach, Fl 33140

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.

Medical Services

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: 1000

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ARTICLE IV TERM OF EXISTENCE

This corporation is to exist perpetually.

ARTICLE V OFFICERS DIRECTORS

The name and street address of the initial officer and director, if any, who shall hold office the first year of the corporation's existence or until their successor is elected, is:

Michael A. Campos - President
6039 Collins Avenue #1007
Miami Beach, Fl 33140

Adriana Pereira - Vice President
6039 Collins Avenue #1007
Miami Beach, Fl 33140

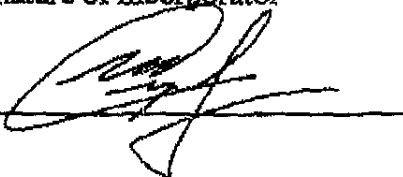
ARTICLE VI INCORPORATOR

The name and street address of the incorporator to these articles of incorporation is:

Michael A. Campos - President
6039 Collins Avenue #1007
Miami Beach, Fl 33140

IN WITNESS WHEREOF, the undersigned incorporator has executed these Articles of Incorporation this day of March 24, 2006.

Signature of Incorporator

X 

CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE

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.

1. The name of the corporation:

Michael A. Campos, M.D., P.A.

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

Michael A Campos – President
6039 Collins Avenue #1007
Miami Beach, Fl 33140

Signature X 

Title President

Date 3/24/06

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 obligations of Section 607.325, Florida Statutes.

Signature X 

Date 3/24/06

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