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FLORIDA PROFIT/NON PROFIT CORPORATION

RALPH DIPRIMA, M.D., P.A.

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**ARTICLES OF INCORPORATION  
FOR**

**RALPH DIPRIMA, M.D., P.A.**

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

**ARTICLE I**

The name of the corporation shall be:

**RALPH DIPRIMA, M.D., P.A.**

**ARTICLE II**

This corporation shall commence existence upon the date of filing with Division of Corporations, state of Florida, and shall have perpetual existence.

**ARTICLE III**

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

2825 N. STATE ROAD 7, STE. 103  
MARGATE, FL 33063

**ARTICLE IV**

The general nature of business of this corporation is a doctor's office.

**ARTICLE V**

The aggregate number of shares which this corporation shall have authority to issue are 1000 shares having an individual par value of \$1.00 Unless otherwise stated in these articles, or in an amendment to these articles, there shall be only one (1) class of stock of this corporation:

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**ARTICLE VI**

The name(s) and address(es) of the initial Registered Agent of this corporation shall be:

RAYMOND J. ZOMERFELD  
999 PONCE DE LEON BLVD., #1045  
CORAL GABLES, FL 33134

**ARTICLE VII**

The name and address of the officers and initial board of directors shall be:

(P/S)  
RALPH DIPRIMA  
2825 N. STATE ROAD 7, STE. 103  
MARGATE, FL 33063

**ARTICLE VIII**

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

RAYMOND J. ZOMERFELD  
999 PONCE DE LEON BLVD., #1045  
CORAL GABLES, FL 33134

The undersigned has executive these Articles of Incorporation  
this 13<sup>TH</sup> day of NOVEMBER, 06

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CERTIFICATE OF DESIGNATION  
REGISTERED AGENT/REGISTERED OFFICE

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THE ARTICLES OF INCORPORATION, 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 RELATING 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  
INCORPORATOR

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