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**CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):**

1. JH Shalom Medical  
(Corporation Name) (Document #)
2. Center, corp  
(Corporation Name) (Document #)
3. \_\_\_\_\_  
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**NEW FILINGS**

- ☒ Profit
- ☐ Not for Profit
- ☐ Limited Liability
- ☐ Domestication
- ☐ Other

**OTHER FILINGS**

- ☐ Annual Report
- ☐ Fictitious Name

**AMENDMENTS**

- ☐ Amendment
- ☐ Resignation of R.A., Officer/Director
- ☐ Change of Registered Agent
- ☐ Dissolution/Withdrawal
- ☐ Merger

**REGISTRATION/QUALIFICATION**

- ☐ Foreign
- ☐ Limited Partnership
- ☐ Reinstatement
- ☐ Trademark
- ☐ Other

## ARTICLES OF INCORPORATION

The undersigned incorporate(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:

**JH SHALOM MEDICAL CENTER, CORP**

### ARTICLE II

#### PRINCIPAL OFFICE

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

19403 SW 114 PL  
MIAMI, FLORIDA 33157

### ARTICLE III

#### SHARES

The number of shares, which the corporation is authorized to issue and have outstanding at any time, is 1000 shares of common stock, and which common stock shall have a par of \$1.00 (one dollar) per share. All stock is to be issued fully paid and exempt from assessment.

### ARTICLE IV

#### INITIAL REGISTERED AGENT AND STREET ADDRESS

In pursuance of Chapter 607.34 Florida Statutes, the following is submitted, in compliance with said:

First That **JH SHALOM MEDICAL CENTER, CORP.** Desiring to organize under the laws of the State Florida with its principal office as indicated in the articles of incorporation at City of MIAMI County of MIAMI-DADE State of Florida had name **ANDRES ECHEMENDIA** of, **19403 SW 114 PL MIAMI, FLORIDA 33157** of its agent to accept service of process within this state. Having been named to accept service of process for the above state corporation, at place designated in this certificate. I hereby accept to act in this capacity, and agree to comply with the provisions of said Act relative to keeping open said office.

By: 

**ANDRES ECHEMENDIA**  
Registered Agent

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**ARTICLE V**

**INCORPORATOR (S)**

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

ANDRES ECHEMENDIA	50% SHARES	19403 SW 114 PL MIAMI, FL 33157
YULIET MENENDEZ	50% SHARES	19403 SW 114 PL MIAMI, FL 33157

**ARTICLE VI**

**DIRECTOR (S)**

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

ANDRES ECHEMENDIA	P/D	19403 SW 114 PL MIAMI, FL 33157
YULIET MENENDEZ	V/P/T/S	19403 SW 114 PL MIAMI, FL 33157

The undersigned incorporate(s) has (have) executed these Articles of Incorporation this 15<sup>TH</sup>  
Day of November 2006.

  
SIGNATURE

  
SIGNATURE