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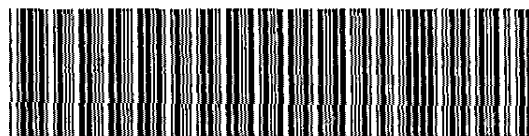
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TALLAHASSEE, FLORIDA

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Cast management

Requestor's Name

Address

City

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VALIDATION ONLY

CORPORATION(S) NAME

Nora Daniel MD PA INC.

☒ Profit

☐ NonProfit

☐ Amendment

☐ Merger

☐ Foreign

☐ Dissolution

☐ Mark

☐ Limited Partnership

☐ Annual Report

☐ Other

☐ Reinstatement

☐ Reservation

☐ Change of Registered Agent

☒ Certified Copy

☐ Photo Copies

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 16, 2007

EMPIRE

SUBJECT: NORA DANIEL MD PA INC
Ref. Number: W07000008226

We have received your document for NORA DANIEL MD PA INC. However, the document has not been filed and is being returned for the following:

The name of the corporation can only list one suffix..... If this is a general corporation please use "INC". If this is a professional corporation please use "PA".

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6934.

Loria Poole
Document Specialist
New Filing Section

Letter Number: 807A00011685

RECEIVED
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
2007 FEB 20 AM 10:28
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TO ACKNOWLEDGE
SUFFICIENCY OF FILING

ARTICLES OF INCORPORATION

FILED
2007 FEB 20 AM 10:41
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

WE THE UNDERSIGNED, HEREBY ASSOCIATE OURSELVES TOGETHER FOR THE PURPOSE OF BECOMING A CORPORATION UNDER THE LAWS OF THE STATE OF FLORIDA PROVIDING FOR THE FORMATION OF A CORPORATION FOR PROFIT WITH THE POWERS, RIGHTS, PRIVILEGES AND IMMUNITIES HEREINAFTER MENTIONED, AND WE HEREBY MAKE, SUBSCRIBE AND ACKNOWLEDGE AND FILE WITH THE SECRETARY OF FLORIDA THESE ARTICLES OF INCORPORATION; AND TO THAT END WE DO, BY THESE ARTICLES, SET FORTH:

ARTICLE I

THE NAME OF THIS CORPORATION (WHICH IS HEREINAFTER CALLED THE "CORPORATION") **NORA DANIEL MD PA**

ARTICLE II

THIS CORPORATION SHALL EXIST PERPETUALLY; CORPORATION EXISTANCE SHALL BEGAIN ON THE DAY UPON WHICH THESE ARTICLES ARE APPROVED BY THE SECRETARY OF THE STATE OF FLORIDA.

ARTICLE III

THE PURPOSE OF THIS CORPORATION IS TO TRANSACT ANY OR ALL LAWFUL BUSINESSES FOR WHICH CORPORATIONS MAY BE INCORPORATED UNDER CHAPTER 607 OF THE FLORIDA STATUTES. INCLUDING, BUT NOT LIMITED TO MEDICAL SERVICES.

ARTICLE IV

THIS CORPORATION IS AUTHORIZED TO ISSUE FIVE HUNDRED (500) SHARES OF COMMON STOCK, WHICH SAID SHARES SHALL HAVE A PAR VALUE OF TEN (\$ 10.00) DOLLARS PER SHARE UPON ISSUANCE.

ARTICLE V

THE PRINCIPAL PLACE OF BUSINESS OF THIS CORPORATION SHALL BE AT: 7700 SW 176 ST MIAMI FL 33157 WITH THE PRIVILEGE OF HAVING BRANCH OFFICES WITHIN AND WITHOUT THE STATE OF FLORIDA.

ARTICLE VI

THE INITIAL REGISTERED AGENT OF THIS CORPORATION UPON WHICH
PROCESS MAY BE SERVED IS: LOUIS F. CAST AND THE INITIAL
REGISTERED OFFICE IS LOCATED AT:
4805 NW 79 AVE # 9 DORAL, FLORIDA 33166

ARTICLE VII

THIS CORPORATION SHALL HAVE ONE DIRECTOR(S) INITIALLY.
THE NUMBER OF DIRECTORS SHALL BE FIXED BY LAW AND MAY BE
CHANGED FROM TIME TO TIME.
THE NAME AND THE STREET ADDRESS OF THE INITIAL DIRECTOR OF THIS
CORPORATION IS:
NORA DANIEL, 7700 SW 176 ST MIAMI FL, 33157
THE AFORSAID DIRECTORS SHALL HOLD OFFICE FOR THE YEAR OF THIS
CORPORATION EXISTANCE OR UNTIL A SUCCESSOR IS CHOSEN AS
PROVIDED FOR IN THE BY LAWS.

ARTICLE VIII

THE INITIAL OFFICERS OF THIS CORPORATION AND THEIR ADDRESSES
ARE:

PRESIDENT: **NORA DANIEL, 7700 SW 176 ST MIAMI FL, 33157**

VICE-PRESIDENT: **NORA DANIEL, 7700 SW 176 ST MIAMI FL, 33157**

SECRETARY: **NORA DANIEL, 7700 SW 176 ST MIAMI FL, 33157**

TREASURER: **NORA DANIEL, 7700 SW 176 ST MIAMI FL, 33157**

ARTICLE IX

THE NAME OF THE UNDERSIGNED HAS EXECUTED THESE ARTICLES OF
INCORPORATION.



SIGNATURE / TITLE

NORA DANIEL/PRESIDENT

CERTIFICATE OF DESIGNATION
REGISTERED AGENT / REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, 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 IS: **NORA DANIEL MD PA**
2. THE NAME AND ADDRESS OF THE REGISTERED AGENT IS **LOUIS F. CAST** AND THE REGISTERED OFFICE IS AT **4805 NW 79 AVE # 9 DORAL , FL 33166**

SIGNATURE: _____



NORA DANIEL
TITLE: PRESIDENT

DATE: 02/13/2007

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE 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 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.


LOUIS F. CAST

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TALLAHASSEE, FLORIDA