

Division of Corporations Page 1 of 1  
**P0800001836a**

Florida Department of State  
Division of Corporations  
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To: Division of Corporations  
Fax Number : (850) 617-6381

From: Account Name : FASTKIT CORPORATE OUTFITS  
Account Number : 071001002335  
Phone : (305) 599-0839  
Fax Number : (305) 716-0346

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DIVISION OF CORPORATIONS  
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**FLORIDA PROFIT/NON PROFIT CORPORATION**

**W08-8100**  
**2548**  
**W08-9020**

**MIGUEL HERNANDEZ MD PA**

Certificate of Status	0
Certified Copy	1
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Estimated Charge	\$78.75

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*gf 2/20/08*

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**ARTICLES OF INCORPORATION**

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

**ARTICLE I NAME**

The name of the corporation shall be:

**Miguel Hernandez MD PA**

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

7824 SW 195 Terr

Miami, FL 33157

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Health Service, Diagnostic & Treatment

**ARTICLE IV SHARES**

The number of shares of stock is:

**50 Shares no par value**

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

List name(s), address(es) and specific title(s):

Miguel Hernandez- 7824 SW 195 Terr

Miami, Fl 55157

President, Treasurur and Secretary

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**ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:  
Miguel Hernandez - 7824 SW 195 Terr  
Miami, Fl 33157

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:  
Miguel Hernandez - 7824 SW 195 Terr  
Miami, Fl 33157

\*\*\*\*\*  
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Y   
\_\_\_\_\_  
Signature/Registered Agent

2/18/08  
\_\_\_\_\_  
Date

X   
\_\_\_\_\_  
Signature/Incorporator

2/18/08  
\_\_\_\_\_  
Date

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