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LAZARUS CORPORATE FILING SERVICE 3320 SW 87TH AVENUE MIAMI, FL 33165 305-552-5973

Office Use Only CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): (Corporation Name) (Corporation Name) (Document #) (Document #) (Corporation Name) (Corporation Name) (Document #) Walk in Pick up time 2 -06 Certified Copy Photocopy Certificate of Status Mail out Will wait NEW FILINGS **AMENDMENTS Profit** Amendment Resignation of R.A., Officer/Director Not for Profit Change of Registered Agent Limited Liability Dissolution/Withdrawal Domestication Other Merger REGISTRATION/QUALIFICATION OTHER FILINGS Annual Report □ Foreign Limited Partnership Fictitious Name Reinstatement Trademark Other

Examiner's Initials

CR2E031(7/97)

ARTICLES OF INCORPORATION

OF

08 MAR 12 AM 8: 30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MARTIN MEDICAL CENTER, INC.

The undersigned, being of legal age and a natural person, do hereby subscribe to, acknowledge and file the following Articles of Incorporation for the purpose of creating a corporation under the law of State of Florida.

ARTICLE I-NAME

The name of the corporation shall be:

MARTIN MEDICAL CENTER, INC.

<u>ARTICLE II - PRINCIPAL OFFICE</u>

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

3250 SW 87 Ave Suite 301 Miami FL 33165

ARTICLE III - DURATION

This corporation shall commence its existence immediately upon the filing of these Articles of Incorporation and shall exist perpetually thereafter unless sooner dissolved according to law.

ARTICLE IV – PURPOSE

The 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.

ARTICLE V - AUTHORIZED SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

100 shares at \$ 1.00 (one dollar) each

ARTICLE VI - INITIAL REGISTERED AGENT AND INITIAL REGISTERED OFFICE

The Corporation's initial Registered Agent and Registered Office in the State of Florida shall be:

Best Vision Accounting, Corp 3250 SW 87 Ave Suite 301 Miami FL 33186

ARTICLE VII - INITIAL BOARD OF DIRECTOR

This Corporation shall have two directors initially. The number of directors may be either increased or diminished from time to time by the By-Law but shall never be less than one. The name and address of the initial directors of this Corporation are:

NAME_	TITLE	ADDRESS
Yamaris Martin	President	4283 SW 161 PI
		Miami, Fl 33185
Yanelis Martin	Vice-President	4283 SW 161 Pl
		Miami, Fl 33185

ARTICLES VIII - INCORPORATOR

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

Yamaris Martin 3250 SW 87 Ave Suite 301 Miami FL 33186

ARTICLE IX - POWERS OF CORPORATION

The Corporation shall have the same powers as an individual to do all things necessary or convenient to carry out its business and affairs, subject to any limitations or restrictions imposed by applicable law or these Articles of Incorporation.

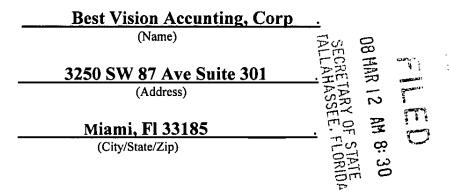
IN WITNESS WHEREOF, I, the undersigned, being the Incorporator hereinbefore named, for the purpose of forming a corporation to do business both within and outside the State of Florida, under the laws of Florida, make and file these Articles of Incorporation, hereby declaring and certifying that the facts herein stated are true, and hereunto sign my name on this <u>06 day of March</u>, <u>2008</u>.

Yamaris Martin

CERTIFICATE OF DESIGNATION OF 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: **MARTIN MEDICAL CENTER, INC.**
- 2. The name and address of the registered agent and office is:



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.

(Signature)

03/06/2008 (Date)

DIVISION OF CORPORATIONS, PO BOX 6327, TALLAHASSEE, FL 32314.