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Division of Corporations
Fax Number : (850) 617-6381

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FLORIDA PROFIT/NON PROFIT CORPORATION

dr. angel feliciano md, pa

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**ARTICLES OF INCORPORATION
OF**

DR. ANGEL FELICIANO MD, PA

The undersigned Incorporator(s), for the purpose of forming a Profit Corporation under Chapter 621 of the Florida Statutes, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of this corporation shall be: DR. ANGEL FELICIANO MD, PA

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be: 7526 N.W. 116th LANE, PARKLAND, FL 33076.

ARTICLE III PURPOSE

The purpose of this corporation shall be: MEDICAL SERVICES.

ARTICLE IV CAPITAL STOCK

The aggregate number of shares which this corporation shall have authority to issue is 100 shares common stock with a \$1.00 par value.

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 V INITIAL REGISTERED AGENT AND ADDRESS

The name and street address of the initial Registered Agent of this corporation shall be: GUY D. SPERDUTO, 8982 TAFT STREET, PEMBROKE PINES, FL 33024.

ARTICLE VI BOARD OF DIRECTOR(S)

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

PRESIDENT\SECRETARY
ANGEL FELICIANO
7526 N.W.116th LANE
PARKLAND, FL 33076

ARTICLE VII INCORPORATOR(S)

The name and address of the incorporator(s) to these Article of Incorporation shall be:

EMPIRE CORPORATE KIT OF AMERICA, INC.
2444 NW 7TH PLACE
MIAMI, FL 33127

The undersigned has executed these Articles of Incorporation this 17th day of FEBRUARY, 2009.


INCORPORATOR

Ray Stormont Signing for
Empire Corporate Kit of America, Inc.

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**CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE**

DR. ANGEL FELICIANO MD, PA

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

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