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 TALLAHASSEE, FLORIDA

**FLORIDA PROFIT/NON PROFIT CORPORATION**

**FAMILY GROUP MEDICAL CENTER INC**

Certificate of Status	0
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## ARTICLES OF INCORPORATION

The undersigned Incorporator(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:

Family Group Medical Center Inc

### ARTICLE II - PRINCIPAL OFFICE

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

4790 NW 7St.  
Miami FL 33126

### ARTICLE III - SHARES

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

100

### ARTICLES IV - INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Onar P. Rodriguez  
4790 NW 7St.  
Miami FL - 33126

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**ARTICLE V - INCORPORATOR**

The name and address of the incorporator to these Articles of Incorporation is:

4790 NW 7th. — OMAR P. Rodriguez  
Miami FL - 33126

The undersigned incorporator has executed these Articles of Incorporation this

30 day of OCTOBER 20 09.

  
Signature

**ARTICLE VI - DIRECTOR(S)**

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

OMAR P. Rodriguez - (P)

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

Having been named as Registered Agent and to accept service of process for the above stated corporation at 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 related 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 Signature

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