Division of Corporations Electronic Filing Cover Sheet

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May 4, 2010

FLORIDA DEPARTMENT OF STATE
Division of Corporations

LAZARUS

SUBJECT: LMG MEDICAL CENTER, INC

REF: W10000021524

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Justin M Shivers Regulatory Specialist II New Filing Section FAX Aud. #: H10000106626 Letter Number: 310A00011002

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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:

LMG MEDICAL CENTER, INC

ARTICLE II - PRINCIPAL OFFICE

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

7201 SW 8 STREET. Miami FL 33144

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:

JUAN CARLOS PEREZ-ESPINOSA.
7201 SW 8 STREET.
Miami FL 33144

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ARTICLE V-INCORPORATOR

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

Juan Carlos Perez-Espinosa. 7201 SW 8 STREET. Miami FL 33144

The undersigned incorporator has executed these Articles of Incorporation this day of 20

et Maria van

ARTICLE VI- DIRECTOR (S)

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

Juan Carlos Perez-Espinosa 7201 SW B STREET. MIAMI FL 33144 (President)

SECRETARY OF STATE TALL AHASSER FLORIDA

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT

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