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To: The Florida Dept. of State
Subject: 002085-125556
Division of Corporations

From: Ashley Smith

May 27, 2010 1:17 PM Page 1 of 3
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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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

From: Account Name : CORPDIRECT AGENTS, INC.
Account Number : 110450000714
Phone : (850) 222-1173
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA
002085-125556

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

FLORIDA PROFIT/NON PROFIT CORPORATION
JOHANNE Y. COMPAS-BARIL, M.D., P.A.

Certificate of Status	1
Certified Copy	1
Page Count	02
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May 27, 2010

FLORIDA DEPARTMENT OF STATE
Division of Corporations

CORPDIRECT AGENTS, INC.

SUBJECT: JOHANNE Y. COMPAS-BARIL, M.D., P.A.
REF: W10000025794

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The specific business purpose of the professional association must be stated in the document.

If you have any further questions concerning your document, please call (850) 245-6973.

Claretha Golden
Regulatory Specialist II
New Filing Section

FAX Aud. #: H10000124993
Letter Number: 810A00013366

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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:

JOHANNE Y. COMPAS-BARIL, M.D., P.A.

ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:

8910 MIRAMAR PARKWAY SUITE 110
MIRAMAR, FLORIDA 33025

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

PHYSICIAN PRACTICE - MEDICAL SERVICES

ARTICLE IV SHARES

The number of shares of stock is:

100 .

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

JOHANNE Y. COMPAS-BARIL, PRESIDENT
1061 NE 204 TERRACE
MIAMI, FLORIDA 33179

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

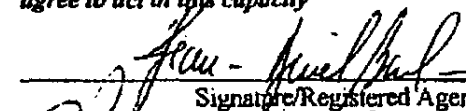
JEAN-DANIEL BARIL
1061 NE 204 TERRACE
MIAMI, FLORIDA 33179


ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

JOHANNE Y. COMPAS-BARIL, M.D.
1061 NE 204 TERRACE
MIAMI, FLORIDA 33179

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



Signature/Registered Agent


Signature/Incorporator

5-25-2010

Date

5-25-2010

Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA