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Florida Department of State
Division of Corporations
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FLORIDA PROFIT/NON PROFIT CORPORATION
ST JUDE MED CARE INC

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February 15, 2011

FLORIDA DEPARTMENT OF STATE
Division of Corporations

LAZARUS

SUBJECT: ST JUDE MED. CARE INC.
REF: W11000009031

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

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

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Adding "of Florida" or "Florida" to the end of a name is not acceptable.

The document number of the name conflict is P10000000430 (ST JUDE MEDICAL CARE INC).

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Becky McKnight
Regulatory Specialist II Supervisor
New Filing Section

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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:

ST JUDE Med and Rehab Care Inc.

ARTICLE II - PRINCIPAL OFFICE

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

6850 Coral way suite 401
Miami FL, 33155.

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:

Yenisleidys Perez
6850 coral way suite 401.
Miami FL, 33155.

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ARTICLE V - INCORPORATOR

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

Yenisleidys Perez.
6850 Coral Way suite 401
Miami FL, 33155.

The undersigned incorporator has executed these Articles of Incorporation this

14 day of February 2011.


Signature**ARTICLE VI - DIRECTOR (S)**The name(s) and street address (es) of the director(s) to these Articles of
Incorporation is (are):

Yenisleidys Perez (P)

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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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