

**P120000032757**

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**FLORIDA PROFIT/NON PROFIT CORPORATION  
INSTITUTE OF ORTHOPAEDIC EXCELLENCE, INC.**

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## ARTICLES OF INCORPORATION

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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:

Institute of Orthopaedic Excellence, Inc.

### ARTICLE II - PRINCIPAL OFFICE

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

9000 SW 87 CT  
Suite 209  
Miami, FL 33174

### 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:

Susana Pereda  
9000 SW 87 CT  
Suite 209  
Miami, FL 33174

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**ARTICLE V - INCORPORATOR**

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

Susana Pereda  
9000 SW 87 ct  
suite 209  
miami, FL 33176

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

Susana Pereda  
Signature

**ARTICLE VI - DIRECTOR (S)**

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

Susana Pereda (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.

Susana Pereda  
Registered Agent Signature

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