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Florida Department of State
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**FLORIDA PROFIT/NON PROFIT CORPORATION
FERNANDEZ FAMILY MEDICINE, INC.**

Certificate of Status	0
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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:

Fernandez Family Medicine, Inc.

ARTICLE II - PRINCIPAL OFFICE

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

901-A SW 87 Ave
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:

Inti Fernandez
901-A SW 87 Ave
Miami FL 33174

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ARTICLE V - INCORPORATOR

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

Inti Fernandez
901 A - SW 87 Ave
Miami FL 33174

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


Signature

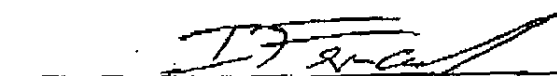
ARTICLE VI - DIRECTOR (S)

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

Inti Fernandez - (P)
901 - A SW 87 Ave
Miami FL 33174

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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