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Florida Department of State
Division of Corporations
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**FLORIDA PROFIT/NON PROFIT CORPORATION
PALM SPRINGS MEDICAL BUILDING OF HIALEAH, INC**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

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14 JUL 16 AM 11:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

07/17/14

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:
OF HIALEAH, INC.

PALM SPRINGS MEDICAL BUILDING

ARTICLE II: PRINCIPAL OFFICE

The principal place of business address of this corporation shall be:

4980 WEST 10 AVE. SUITE 102
HIALEAH, FL 33012

The mailing address of this corporation shall be:

4980 WEST 10 AVE. SUITE 102
HIALEAH, FL 33012

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TALLAHASSEE, FLORIDA

ARTICLE III: SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

ONE HUNDRED SHARES ONE DOLLAR PAR VALUE

Prepared by:
Pedro M. Ramos, CPA
221 East 49 Street
Hialeah, Florida 33013
(305) 821-3022

ARTICLE IV: TERM OF EXISTENCE

This corporation is to exist perpetually.

ARTICLE V: OFFICERS / DIRECTORS

The name(s) and street address(es) of the initial officer(s) and director(s), if any, who shall hold office the first year of the corporation's existence or until their successor(s) is (are) elected, is (are):

RAMON GARCIA-SEPTIEN

10185 COLLINS AVE. APT. 803

MIAMI BEACH, FL 33154

ARTICLE VI: INCORPORATOR(S)

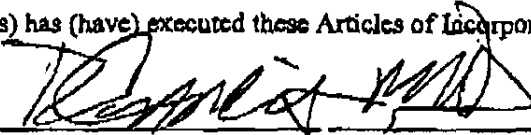
The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is (are):

RAMON GARCIA-SEPTIEN

10185 COLLINS AVE. APT. 803

MIAMI BEACH, FL 33154

The undersigned incorporator (s) has (have) executed these Articles of Incorporation the 16th day of July 2014.



Signature

Signature

Signature

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

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TALLAHASSEE, FLORIDA

CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT / REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE / REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is:

PALM SPRINGS MEDICAL BUILDING OF HIALEAH, INC.

2. The name and address of the registered agent and office is:

RAMON GARCIA-SEPTIEN

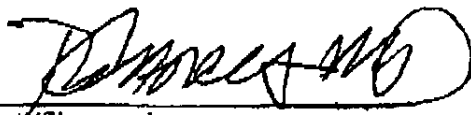
10185 COLLINS AVE. APT 803

(P.O., Box is unacceptable)

MIAMI BEACH, FL 33154

(City / State / Zip Code)

Having been named as registered agent and to accept service of process for the above stated corporation at the 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.


(Signature)


(Date)

DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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