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ARTICLES OF INCORPORATION

OF

DANIEL CALVA-CERQUEIRA, M.D., P.A.

The undersigned incorporator(s), for the purpose of forming a Professional Service Corporation under Chapter 621 of the Florida Statutes, hereby adopt(s) the following Articles of Incorporation

ARTICLE I NAME

The name of the corporation shall be:

DANIEL CALVA-CERQUEIRA, M.D., P.A.

ARTICLE II PRINCIPAL OFFICE

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

10051 S.W, 68th St. Miami, FL 33173

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

10051 S.W. 68th St. Miami, FL 33173

ARTICLE III PURPOSE

The purpose of this corporation shall be:

This corporation is organized for the purpose of providing plastic surgery services.

ARTICLE IV CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding is:

100 shares at \$1.00 per value

ARTICLE V INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:

Daniel Calva-Cerqueira, M.D. 10051 S.W. 68th St. Miami, FL 33173

ARTICLE VI BOARD OF DIRECTOR (S)

The name and address of the initial board of director(s) shall be:

Daniel Calva-Cerqueira, M.D. 10051 S.W. 68th St. Miami, FL 33173

ARTICLE VII OFFICER (S)

The name, title and address of the officer(s) of this corporation shall be:

Daniel Calva-Cerqueira, M.D.
President/Secretary/Treasurer
10051 S.W. 68th St.
Miami, FL 33173

ARTICLE VIII INCORPORATOR (S)

The name and address of the incorporator(s) to these Articles of Incorporation shall be:

Daniel Calva-Cerqueira, M.D. 10051 S.W. 68th St. Miami, FL 33173

The undersigned has (have) executed these Articles of Incorporation this 13 day of IANUARY ..., 2015.

Incorporator Signature

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Secretary of SIMIS

CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERD OFFICE

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THE ARTICLES OF INCORPORATION, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED 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.

REGISTERED AGENT SIGNATURE