

**Electronic Articles of Incorporation  
For**

P16000058431  
FILED  
July 11, 2016  
Sec. Of State  
jafason

MED PLAN CLINICS, INC.

The undersigned incorporator, for the purpose of forming a Florida profit corporation, hereby adopts the following Articles of Incorporation:

**Article I**

The name of the corporation is:

MED PLAN CLINICS, INC.

**Article II**

The principal place of business address:

8750 NW 36 ST  
SUITE 300  
DORAL, FL. US 33178

The mailing address of the corporation is:

8750 NW 36 ST  
SUITE 300  
DORAL, FL. 33178

**Article III**

The purpose for which this corporation is organized is:

ANY AND ALL LAWFUL BUSINESS.

**Article IV**

The number of shares the corporation is authorized to issue is:

100,000

**Article V**

The name and Florida street address of the registered agent is:

LACY K LOAR  
8750 NW 36 ST  
SUITE 300  
DORAL, FL. 33178

I certify that I am familiar with and accept the responsibilities of registered agent.

Registered Agent Signature: LACY LOAR

## **Article VI**

The name and address of the incorporator is:

LACY LOAR  
8750 NW 36 ST  
SUITE 300  
DORAL, FL 33178

Electronic Signature of Incorporator: LACY LOAR

I am the incorporator submitting these Articles of Incorporation and affirm that the facts stated herein are true. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of this corporation and every year thereafter to maintain "active" status.

## **Article VII**

The initial officer(s) and/or director(s) of the corporation is/are:

Title: P, D  
MANUEL E IGLESIAS  
8750 NW 36 ST. SUITE 300  
DORAL, FL. 33178 US

Title: T, D  
TED MOFFLY  
8750 NW 36 ST  
DORAL, FL. 33178 US

Title: S, D  
MARTHA MAIRENA  
8750 NW 36 ST  
DORAL, FL. 33178

## **Article VIII**

The effective date for this corporation shall be:

07/11/2016