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ARTICLES OF INCORPORATION

OF

JOE PROZA, 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:

JOE PROZA, M.D., P.A.

ARTICLE II PRINCIPAL OFFICE

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

7905 S.W. 104th ST., APT. H-106 MIAMI, FL 33156

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

7905 S.W. 104th ST., APT. H-106 MIAMI, FL 33156

ARTICLE III PURPOSE

The purpose of this corporation shall be:

This corporation is organized for the purpose of providing medical 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 par value

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ARTICLE V INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:

JOE PROZA, M.D. 7905 S.W. 104th ST., APT. H-106 MIAMI, FL 33156

ARTICLE VI BOARD OF DIRECTOR (S)

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

JOE PROZA, M.D. 7905 S.W. 104th ST., APT. H-106 MIAMI, FL 33156

ARTICLE VII OFFICER (S)

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

JOE PROZA, M.D.
PRESIDENT/SECRETARY/TREASURER
7905 S.W. 104th ST., APT. H-106
MIAMI, FL 33156

ARTICLE VIII INCORPORATOR (S)

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

JOE PROZA, M.D. 7905 S.W. 104th ST., APT. H-106 MIAMI, FL 33156

The undersigned has (have) executed these Articles of Incorporation this _____ day of

Incorporator Signature

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