

TRANSMITTAL LETTER

P95000003842

Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

700001879927
-01/13/95--01020--014
*****78.75 *****78.75

SUBJECT: HIALEAH ACUTE DIALYSIS SERVICES, INC.
(Proposed corporate name - must include suffix)

Enclosed is an original and one (1) copy of the articles of incorporation and a check for :

\$70.00
Filing Fee

\$78.75
Filing Fee
& Certificate

\$122.50
Filing Fee
& Certified Copy

\$131.25
Filing Fee,
Certified Copy
& Certificate

Additional Copy Required

FILED
1995 JAN 12 AM 9:00
TALLAHASSEE, FL
SECRET

FROM: HIALEAH ACUTE DIALYSIS SERVICES, INC.
Name (printed or typed)

777 E. 25th ST. #508
Address

HIALEAH FL 33013
City, State & Zip

(305) 835-4601
Daytime Telephone number

FILED
1/17/95
P95-3842

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION

FILED
2005 JUN 12 PM 9:00
STATE OF FLORIDA
TALLAHASSEE

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:

HIALEAH ACUTE DIALYSIS SERVICES, INC.

ARTICLE II PRINCIPAL OFFICE

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

777 E. 25th St. #508
HIALEAH, FL. 33013

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 1

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

MARIO S. BUSTOS
777 E 25th St. #508
HIALEAH, FL. 33013

FILING FEE: \$70.00

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

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

MARIO S. BUSTOS
20101 NW 10th ST.
Pembroke Pines, FL 33029

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

1st day of JANUARY, 19 95.

Mario S. Bustos
Signature

Signature

Signature

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

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 or 617.0501, 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: HIALEAH ACUTE DIALYSIS SERVICES, INC.

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

MARIO S. BUSTOS
(Name)

777 E. 25TH ST. #508
(P.O. Box not acceptable)

HIALEAH, FL 33013
(City/State/Zip)

FILED
1995 JAN 12 AM 9:00
TALLAHASSEE, FLORIDA

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.

Mario S. Bustos
(Signature)

1/1/95
(Date)