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VENTU	RE MEDIC	AL ASSOCIATES, I	
V) Profit		SECRETARY OF TALLAHASSEE,	MPRE Toll Free: 1-800-432-3028
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() Foreign () Limited Pertnership () Reinstatement	() Dissolution () Annual Report () Reservation	() Other () Change of Registered Agent	00-432-
Cortified Copy Call When Ready Walk In	() Photo Copies () Call If Problem) Will Walt	() Certificate Under Seel () After 4:30 () Mail Out	3028
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W.P. Verifier

CR2E031 (R8-85)

ARTICLES OF	F INCORPORATION	
VENTURE MEDICAL		
(name	of corporation)	
The undersigned subscriber(s) to these Articles of Incor- corporation under the laws of the State of Florida.	poration, natural person(s) com	petent to contract, hereby form
The name of the corporation is:	CORPORATE NAME	
Venture Medical As	SOCIETES, INC.	
ARTICLE	II - DURATION	= 40 = 5
This corporation shall exist perpetually unless dissolve	d according to Florida law.	Eg 3
ARTICLE	III - PURPOSE	
The corporation is organized for the purpose of engagin United States and the State of Florida.	g in any activities or business p	crmitted units he laws of the
The corporation is authorized to issue	CAPITAL STOCK shares (500)	ONE
Dollar(s) (\$) par value Common	n Stock, which shall be design	ated "Common Shares."
ARTICLE V - INITIAL REGI	ISTERED OFFICE AND AGE	ENT
The street address of the Initial Registered Agent office	and the name of the Initial Reg	istered Agent at that office is:
INAME L		
ADDRESS 11321 SW 162 TERRACE		
CITY HIAMI	FLORIDA FL	zip 33157
The principal office, if known, or the mailing adress of	the corporation is:	
NAME LUZ A. Ventura		
ADDRESS 1/321 S.W. 162 TERRACE		
CHY MINHT	FLORIDA FL	zip 33157
ARTICLE VI - INITIAL	BOARD OF DIRECTORS	ZP 3314 /
17th:) directors initially. The numb	er of directors may be either n one (1). The names and
NAME LUZ A. Ventura		
ADDRESS 1/321 S.W 162 TERRACI		
CITY HIAMI	STATE FL	ZIP 33K7
NAME		
ADDRESS		
СПУ	STATE	ZIP
NAME		
ADDRESS		
лү	STATE	ZIP
FORM 215: ARTICLES OF INCORPORATION, PAGE 1 PAGE		SEMINOLE-MIAMI 012593

ARTICLE VII - INCORPORATORS

I NC CAM	es and addresses	of the incorporat	ors signing these	Articles of	incorporation are a	s follows:	
NAME	luz A	Ventu					
ADDRESS	11321 3		TOPPACE	·			····
CITY	HIAHT			STATE	FL	71P	33457
NAME	·						2212 (
ADDRESS							
CTIY				STATE		——— Zip	···
NAME							
ADDRESS							··-
CTTY				STATE		ZIP	
IN WITNE	iss whereof, th	undersigned sul	bscriber(s) have	executed these	Articles of Incorpor	ration this	28×
		<	Ang	M	2		(C b)
N	OFFICIAL NOTAR ANA 8 MOHAM OTAR: !'UBLIC !'TATI	MADI /					(Scal)
i i	COMMISSION NO.	CG141047					(Seal)
							(Seal)

CERTIFICATE AND ACKNOWLEDGEMENT OF REGISTERED AGENT

CERTIFICATE OF REGISTERED AGENT

OF

Venture Medical Associates INC.

Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted: The above corporation, desiring to organize under the laws of the State of Florida with its registered office as indicated in the Articles of Incorporation

miami, FL. 33157

has named Luz A. VENTURA

located at the aforesaid address, as its Registered Agent to accept service of prowithin this state.

ACKNOWLEDGEMENT

Having been named as Registered Agent to accept service of process for the above stated corporation at the place designated in this certificate, and being familiar with the obligations of that position, I hereby accept to act in this capacity, and agree to comply with the provisions of Florida Law in keeping open said office.

Lung a. Ventura