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ALVAREZ & ALVAREZ 9445 SW 40 STREET-SUITE 105 Minml, FL . 33165

Date\_JULY 1,1995

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Secretary of State
Division of Corporations
Tallahassee, FL 32302-1500

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Dear Sir:

Please return the enclosed articles of incorporation to us, at the above address, for the following corporation:

RAFAEL F. AVILES M.D. P.A.

Thank you.

S acerely,

JOSEMWAREZ

Enclosures

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## Certificate of Incorporation

() RAPALL F. AVILLS M.D. P.A.
We, the under signed, hereby associated ourselves together for the purpose of becoming a corporation under the laws of the State of Florida by and under the provisions of the statutes of the State of Florida, providing for the formation, rights, privileges, immunities and happings of incorporation for profit.  Article I
The name of the corporation shall be: RAFAEL F. AVILES M.D. P.A.
Article II  The corporation will engage in any activity or business permitted under the laws of the State of Florida and of the United States of America.
Article III
The maximum number of shares which the corporation is authorized to issue and have outstanding at any one time is 100 shares of common stock, which shares shall be of one dollar each (\$1.00).  All stock is to be issued as fully paid and exempt from assessment.
Article IV
The pledge, sales, transfer or other disposition of the capital stock may be governed and restricted by the by-laws or written agreement among the stockholders which shall be on file in the office of the corporation.
Article V
The amount of capital with this corporation may begin doing business shall be not less than one hundred dollars (\$100,00).
Article VI
The existence of the corporation is perpetual.
Article VII
The initial post office address of the principal office of the corporation in the State of Florida is 7441 WAYNE AVENUE APT. 105
MIAMI BEACH FIORIDA 33141-2133
The Board of Directors may, from time to time, move the principal office to any other address in the State of Florida. The registered address of the corporation is

The registered Agent at the registered address is  $\frac{|RAFAEL||F|||AVILES||}{|M||D|}$ .

## Article VIII

The business of the corporation shall be managed by a Board of Directors consisting of not less than one (1) nor more than (2) directors. A quorum for the holding of meetings of the board of directors and for the transaction of any business which will be properly done by the directors on behalf of the corporation shall consist of a majority of the members thereof; but the directors, by unanimous consent in writing, included among the minutes of the corporation, may consent to the doing of any act and such consent in writing shall have the same force and effect as though a formal meeting had been held pursuant to call being duly made and as though the said act had been done and authorized at a meeting at which a quorum had been present, or such duties may be delegated to an Executive Committee.

## Article IX

The names and post office addresses of the members of the first Board of Directors and the state of Corporate Officers are as follows:

Name RAFAEL F. AVILES	Title PRES/SEC./TREAS	Address 5. 7441 WAYNE AVE	
		MINMI BENCH F	<u> </u>
<u>,</u>			1
· · · · · · · · · · · · · · · · · · ·			
	Article	X .	
The names and post office a number of shares that they a	ddresses of the subscribe	•	oration and
Name RAFAEL F. AVILES	Address 7441 WAYNE AVEN	UE ART 105	No. of Shares
MAPACE P. AVILES	MIAMI BEACH FLA		100
			<del></del>
	<del>-</del>	<del></del>	
_	Article >		
The stock of the corporation internal Revenue Code, so the rovided thereunder.			
N WITNESS WHEREOF,		r hands and seal this	т.
lay ofJULY	_1995		
	1///	ile i	

RAFAEL F. AVILES M.D.

State of Florida County of Dade	3
THEREBY CERTIEY THAT on this day, per rized to administer oaths and take acknowled	isonally appeared before not, an officer duly authorized gments under the laws of the State of Florida.
RALALL L. AVILLS N.D.	
to me well known to be the persons described Incorporation, and acknowledged before me to for the purpose therein expressed.	f in and who executed the foregoing Certificate of that they executed the same freely and voluntarily
WITNESS my hand official seal at City of M day ofJULY, 1995	iami, State of Florida, this
	Jan
My Commission E	ur ()
Certificate designating place of business or do naming Agent upon whom process may be ser	micile for the service of process within File ved.
In compliance with Section 48.091, Florida Sta First, that RAFAEL F. AVILES M.D. (Name of C	atutes, the following is submitted:
	of the State of Florida, with its principal place of snamed RAFAEL F. AVILS M.D.
located at 7541 WAYNE AVENUE APT.	(Name of Registered Apple)  10E- MIAMI BEACH, FLORIUM 33141-213
( Street address and number of	10E- MIAMI BEACH, FLORIUM 33141-213
City of Miami, State of Florida, as its Agent to	accept service of process within Florida.
Signature	La Civilei
Title	Date
Having been named to accept service of process designated in this certificate. I hereby agree to a with the provisions of all statutes relative to the	PRES/SFC/TREAS. JULY 1,1995 s for the above state corporation, at the place sect in this capacity, and I further agree to comply proper and complete performance of my duties.
Signature	- Lander
	( Kentstered Annal)

Date

\_\_\_\_HULY 1,1995