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FLORIDA DIVISION OF CORPORATIONS

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TO: DIVISION OF CORPORATIONS

DEPARTMENT OF STATE

BTATE OF FLORIDA

409 EAST GAINES STREET TALLAHASSEE, FL 32399

FAX: (904) 988-4000

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FROM: FAB-T CORP. AGENTS, INC.

8405 NW SBRD BT BUITE C-100

MINMI FL 33166-

CONTACT: LIDIA FERNANDEZ

PHONE: (305) 599-0839

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FAX: (305) 598-9591 DOCUMENT TYPE: FLORIDA PROFI FLORIDA PROFIL CORPURATION OR P.A.

NAME: PROVINCIAL MEDICAL OFFICES, INC.

FAX AUDIT NUMBER: H95000009604

DATE REQUESTED: 08/30/1995

CERTIFIED COPIES: 1

TIME REQUESTED: 10:34:53

CERTIFICATE OF STATUS: Ø
METHOD OF DECIVERY: FAX

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### ARTICLES OF INCORPORATION

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### PROVINCIAL MUDICAL OFFICED, INC.

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THE UNDERSIGNED INCORPORATOR, FOR THE PURPOSE OF FORMING A CORPORATION UNDER THE FLORIDA GENERAL CORPORATE ACT, HEREBY ADOPTS THE JLLOWING ARTICLES OF INCORPORATION.

#### ARTICLE IL NAME

THE NAME OF THE CORPORATION SHALL BE: PROVINCIAL MEDICAL OFFICES, INC.

### ARTICLE II: NATURE OF THE BUSINESS

THIS CORPORATION MAY ENGAGE IN OR TRANSACT ANY OR ALL LAWFUL ACTIVITIES OR BUSINESS PERMITTED UNDER THE LAWS OF THE UNITED STATES, THE STATE OF FLORIDA, AND ANY OTHER STATE, COUNTRY, TERRITORY OR NATION. THE PRINCIPAL PLACE OF BUSINESS AND MAILING ADDRESS OF THIS CORPORATION SHALL BE:

7810 SW 132nd Avenue Miami, FL 33186

### ARTICLE III: CAPITAL STOCK

THE AGGREGATE NUMBER OF SHARES OF STOCK AND ITS PAR VALUE THAT THIS CORPORATION IS AUTHORIZED TO ISSUE AND HAVE OUTSTANDING AT ANY ONE TIME IS: 1,000 SHARES OF COMMON STOCK, PAR VALUE \$ 1.00 PER SHARE.

## ARTICLE IV: TERM OF BRISTENCE

THIS CORPORATION SHALL EXIST PERPETUALLY.
Prepared by: Nelson Alvarez
7810 SW 132nd Avenue
Miami, Fl 33186
(305) 226-9472

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### H95000009604

### ARTICLE VI OFFICERS AND DIRECTORS

THE NAMES AND STREET ADDRESSES OF THE INITIAL OFFICERS AND DIRECTORS, WHO SHALL HOLD OFFICE THE PIRST DAY OF THE CORPORATION'S EXISTENCE UNTIL THEIR SUCCESSORS ARE ELECTED ARE:

PRESIDENT & TREASURER:

Noison Alvaroz BBN 261-97-5416 7810 SW 132nd Avo. Miami, Florida 33186

### ARTICLE VI: INCORPORATOR

THE NAME AND STREET ADDRESS OF THE INCORPORATOR TO THESE ARTICLES OF INCORPORATION IS:

Nolson Alvaruz SSN 261-97-5416 7810 SW 132nd Avenue Miami, Florida 33186

IN WITHESE WHEREOF, THE UNDERSIGNED INCORPORATOR HAS EXECUTED THESE ARTICLES OF INCORPORATION THIS 29 DAY OF AUGUST OF 1995.

SIGNATURE OF INCORPORATOR

H95000009604

#### H95000009604

# CERTIFICATE OF DEBIUNATION

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 OF THE FLORIDA STATUTES, THE UNDERSIGNED CORPORATION SUBMITS THE PROVISIONS STATEMENT IN DESIGNATING THE REGISTERED OFFICE/AGENT, IN THE STATE OF FLORIDA.

- 1. THE NAME OF THE CORPORATION IS: Provincial Medical Orthogo. The
- 2. THE NAME AND ADDRESS OF THE REGISTERED AGENT AND OFFICE TESTS

Nelson Alvaruz SSN 261-97-5416 7810 SW 132nd AV. Miami, Florida 33186

NELSON ALVAREA, PRESIDENT

DATE:

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THE 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 OF MY POSITION AS REGISTERED AGENT.

ALVAREZ, REGISTERED AGENT

DATE: