12:35 AM TATE KIT COMPANY GLER ST 200 FL **33135**~ 301-MIAM CONTACT: RAY FL 32399 STORMONT (904) 922-4000 PHONE: (305) 541-3684 FAX: (305) 541-3770 (((H95000010346))) DOCUMENT TYPE: FLORIDA PROFIL CORPORATION OR P.A. NAME: CLAUDIA ZORNOGA M.D. FAX AUDIT NUMBER: H95000010346 P.A. CURRENT STATUS: REQUESTED DATE REQUESTED: 09/18/1995 TIME REQUESTED: 12:35:02 CERTIFIED COPIES: 1 NUMBER OF PAGES: 6 CERTIFICATE OF STATUS: 0
METHOD OF DELIVERY: FAX ESTIMATED CHARGE: \$122.50 ACCOUNT NUMBER: 072450003255 Note: Please print this page and use it as a cover sheet when submitting documents to the Division of Corporations. Your document cannot be processed without the information contained on this page. Remember to type the Fax Audit number on the top and bottom of all pages of the document. (((H95000010348))) ** ENTER 'M' FOR MENU. ** ENTER SELECTION AND (CR): Holp F1 Option Menu F2 NUM CAPS Connect: 00:15:

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FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Sucretary of State

September 15, 1995

EMPIRE CORPORATE KIT COMPANY

MIAMI, FL

SUBJECT: CLAUDIA ZORNOSA M.D., P.A.

REF: N95000018659

We received your electronically transmitted document. However, the document has not been filed and needs the following corrections:

FLEASE CORRECT THE HEADING OF PAGE ONE TO STATE FILING UNDER PROFESSIONAL SERVICES CORPORATION ACT, NOT GENERAL CORPORATION ACT.

The corporate name must be identical throughout the document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have p^2 , questions concerning the filling of your document, please call (904) 467-6934.

Loria Poole Corporate Specialist

FAX Aud. #: H95000010346 Letter Number: 295A00042645

Division of Corporations - P.O. Box 6327 - Tallahassee, Florida 32314



FLORIDA DEPARTMENT OF STATE Sandre B. Mortham Secretary of State

September 19, 1995

EMPIRE CORPORATE KIT COMPANY

MIAMI, FL

SUBJECT: CLAUDIA ZORNOSA M.D., P.A.

REF: W95000018659

We received your electronically transmitted document. However, the document has not been filed and needs the following corrections:

The corporate name must be identical throughout the document.

SEE R.A. CERTIFICATE. ***

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6934.

Loria Poole Corporate Specialist FAX Rud. #: H95000010346 Letter Number: 495A00043005

Division of Corporations - P.O. Box 6327 - Tallahassee, Florida 32314

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ATTICLES OF INCORPORATION

OF

Claudia Zornosa M.D. P.A.

H95000001034 The undersigned, acting as Incorporator of a corporation under the Florida Services Corporation Act, adopts the following Articles of Incorporation for the purpose of forming a corporation under the laws of the state of Florida.

I. NAME

The name of this corporation and initial office is:

Claudia Zornosa M.D. P.A.

15261 Wilshire Court

Pembroke Pines, Florida 33027

II. Duration

The period of its duration is perpetual.

III. Capital Stock

The corporation is authorized to issue 7500 shares, all of one class, at \$1.00 par value. This stock will be considered to be section 1244 stock.

IV. INITIAL REGISTERED OFFICE AND AGENT

The name and address of the initial registered agent and office of this corporation is as follows:

Claudia Zornosa MD

15261 Wilshire Court/ Pembroke Pines, Fl 33027

PIEPARED BY:

シャン・マフター1252

H9 5000010346 V. PURPOSE

The general purpose for which the corporation is organized is for the personal service of health care and shall include any and all business for which corporation may be incorporated under the General Gorporation Law of Florida other than the banking business, the trust company business or the practice of a profession purmitted to be incorporated by the Florida Corporations Code.

VI. INITIAL BOARD OF DIRECTORS

This corporation shall have one director initially. The number of directors may be either increased or decreased from time to time by an amendment of the bylaws of the corporation in the manner provided by law, but shall never be less than one (1).

The name and address of the initial director of this corporation arg:

Claudia Zgrnosa MD......President/Secretary/ Director Social Security #263-51-9198

VII. INCORPORATOR

The name and address of the Incorporator signing these Articles of Incorporation is:

Claudia Zornosa MD 15261 Wilshire Court Pembroke Pines, Florida 33027

VIII. BYLAN AMENDMENT

The power to adopt, alter, amend or repeal the bylaws of this corporation shall be vested in the Board of Directors and the shareholders.

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H9 5000010346 IX. INDEMNIFICATION

The corporation shall indemnify any officer or director, or any former officer or director, to the full extent permitted by law.

X. INFORMAL ACTION OF DIRECTORS

It all the Directors severally or collectively consent in writing to any action taken or to be taken by the corporation, and the writings evidencing their consent are filed with the Secretary of the corporation, the action shall be as valid as though it had been authorized at a meeting of the Board of Directors.

KI. AMENDMENT OF ARTICLES

This Corporation reserves the right to amend or repeal any provisions contained in these Articles of Incorporation, or any amendment hereto, and any right conferred upon the share-holders is subject to this reservation.

XII. NON-RESIDENT DIRECTORS

Directors need not be residents of this state or shareholders unless Articles of Incorporation or Bylaws so require.

XIII. DIRECTORS' AUTHORITY TO FIX COMPENSATION

Directors shall have authority to fix the compensation unless otherwise provided in Articles of Incorporation or Bylaws.

Claudia Zórnosa MD

15261 wilshire Court

Pembroka Pines, Fl 33027

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H9 50000 10 346 XIV. PREEMPTIVE RIGHTS

Each shareholder of this corporation shall have the first right to purchase shares (and securities convertible into shares) of any class, kind or series or stock in this corporation that may from time to time be issued (whether or not presently authorized), including shares from the treasury of this corporation, in the ratio that the number of shares he holds at the time of issue bears to the total number of shares outstanding, exclusive to treasury shares. This right shall be deemed waived by any pharcholder who does not exercise it aid pay for the shares preempted within thirty (30) days of receipt of a notice in writing from the corporation, stating the prices, terms and conditions of the issue of shares, and inviting him to exercise his preemptive rights. This right may also be waived by affirmative written waiver submitted by the shareholder to the corporation within thirty (30) days of receipt of notice form the corporation.

XV. MEETINGS BY CONFERENCE TELEPHONE

Mambers of the Board of Directors may participate in special meetings of the Board of Directors by means of conference telephone as provided by law, but regular meetings of the Board of Directors must be attended in fact in person by each director.

IN WITNESS WHEREOF, the undersigned incorporator has executed these Articles of Incorporation

Claudic Truse m Claudia Zornosa MD, Incorporator

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applications and to State of Florida) 95: County of Dade

BEFORE ME, the undersigned authority, personally appeared __ Claudia Zornosa MD and _____, and to me known to be the persons who executed the foregoing Articles of Incorporation, and acknowledged to and before me that they executed such instrument.

IN WITHESS WHEREOF, I have hereunto set my hand an seal this

1995 day of Notary Public

CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN THIS STATE: NAMING AGENT UPON WHOM PROCESSMAY BE SERVED

In pursuance of the Florida Statutes, the following is submitted in compliance with said Act:

First - That Claudia Zornosa Mrn., P.A. desiring to organize under the laws of the Stateof Florida with its principal offices, as indicated in the Articles of Incorporation, State of Florida has named as its agent to accept service within this state,

Claudia Zornosa MD located at

15261 Wilshire Court

Pembroke Pines, Fl. 33027

ACKNOWLEDGMENT: (MUST BE SIGNED BY DESIGNATED AGENT)

Having been named to accept service of process for the above stated corporation, at place designated in this certificate, I hereby accept to act in this capacity, and agree to comply with the provision of said Act relative to keeping open said office.

> N . A Claudia Zornosa, Registered Agent

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