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| | LAZARUS COL | PORATE INDUSTRIES, INC. | |
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| | 890 S.W. 87 | AVENUE SUITE: 16 | |
| | | Address | F68.901 |
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| | - | SENTATIVE TALLAHASSEE Office Use Only | |
| | | NAME(S) & DOCUMENT NUMBER(S), (if known): | |
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| | NEW FILINGS | Amendment San Amendment | |
| 7 | Profit | Amendment | |
| | NonProfit | Resignation of R.A., Officer/ Director | |
| | Limited Liability | Change of Registered Agent | |
| | Domestication | Dissolution/Withdrawal | |
| | Other | Merger | |
| N/A | OTHER FILINGS | | |
| 91//91 | Annual Report | REGISTRATION 789-502-672 ROUALIFICATION 1496 2172 | |
| | Fictitious Name | Foreign Foreign | 1 |
| | Name Reservation | Limited Partnership | <u>:</u> |
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| | | Foreign Limited Partnership Reinstatement Trademark Other | O |
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Examiner's Initials



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

Fobruary 1, 1996

LAZARUS CORPORATE INDUSTRIES, INC. 890 SW 87 AVENUE #16 MIAMI, FL 33174

SUBJECT: M.D. SERVICES CORP. Ref. Number: W96000002472

We have received your document for M.D. SERVICES CORP. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Simply adding "of Florida" or "Florida" to the end of an entity name **DOES NOT** constitute a difference. Please select a new name and make the substitution in all appropriate places. One or more words may be added to make the name distinguishable from the one presently on file.

When the document is resubmitted, please return a copy of this letter to ensure that your document is properly handled.

If you have any questions about the availability of a particular name, please call (904) 488-9000.

If you have any questions concerning the filing of your document, please call (904) 487-6973.

Claretha Golden Document Specialist

Letter Number: 596A00004470

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ARTICLES OF INCORPORATION

OF

FILED

MIAMI M.D. SERVICES CORP.

96 FEB -2 PN 3: 22

SECRETARY OF STATE TALLAHASSEE, FLORIDA

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida General Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the Corporation shall be: MIAMI M.D. SERVICES CORP.

The principal place of business of this corporation shall be: 3027 NW 30 St Miami, F1 33142

ARTICLE II NATURE OF BUSINESS

This corporation may engage in or transact any or all lawfull activities or business permitted under the laws of the United States, the State of Florida, or any other state, country, territory or nation.

ARTICLE III CAPITAL STOCK

The aggregate number of shares of stock and its par value that this corporation is authorized to have outstanding at any one time is: 100 Shares-1.00 Value

ARTICLE IV TERM OF EXISTENCE

This corporation is to exist perpetually.

ARTICLE V OFFICERS DIRECTORS

The name(s) and street address(es) of the inicial officer(s) and director(s), if any, who shall hold office the first year of the corporation's existence or until their successor(s) is(are) elected, is(are):

Maria A. Sanchez 3027 NW 30 St Miami,F1 33142 President 50 %

Daniel Reyes 3027 NW 30 St Miami,Fl 33142 Vice-President 50 %

ARTICLE VI INCORPORATOR(S)

| The name(s) and street address incorporation is(are): | (es) of the incorporator(s) to this articles of |
|--|---|
| Maria A Sanchez | 3027 NW 30 St Miami,FL 33142 |
| Daniel Reyes | 3027 NW 30 St Miami,FL 33142 |
| IN WITNESS WHEREOF, the unthese Articles of Incorporation th | ndersigned incorporator(s) has(have) executed is <u>16</u> day of <u>January</u> , 19 <u>96</u> . |
| STATE OF Florida | Signature(s) of Incorporator(s) |
| COUNTY OF Dade | • |

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FIL.ED

96 FEB -2 PH 3: 22

SECRETARY OF STATE
TALLATIASSEE, FLORIDA

CERTICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 607 325, Florida Statutes, the undersigned corporation,

organized under the lows of the State of Florida, submits the following statement in designating the registered office/registerd agent, in the State of Florida 1 The name of the corporation is: MIAMI M.D. SERVICES CORP. 2. The name and address of the registered agent and office is Mária X Sánchez 3027 NW 30 St (P O BOX NOT ACCEPTABLE) Miami, FL 33142 (CITY/STATE-ZIP) TITLE President/registerd Agent 01/16/1996 DATE _ HAVING BEEN NAMED TO ACCEPT SERVICE OR PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325, FLORIDA STATUTES. SIGNATURE DATE 01/16/1996

REGISTERED AGENT FILLING FEE.