

2/08/96

FLORIDA DIVISION OF CORPORATIONS

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TO: DIVISION OF CORPORATIONS

FROM: FAS CORP. AGENTS, INC.

DEPARTMENT OF STATE

8400 W 53RD ST

STATE OF FLORIDA

SUITE C-100

409 EAST GINGER STREET

MIAMI FL 33166-

TALLAHASSEE, FL 32399

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FAX: (904) 922-4000

PHONE: (305) 599-0839

FAX: (305) 592-9591

((H96000001924))

DOCUMENT TYPE: FLORIDA PROFIT CORPORATION OR P.A.

NAME: SAN FRANCIS MEDICAL CENTER, INC.

FAX AUDIT NUMBER: H96000001924

CURRENT STATUS: REQUESTED

DATE REQUESTED: 02/08/1996

TIME REQUESTED: 16:08:18

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CERTIFICATE OF STATUS: 1

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DIVISION OF CORPORATIONS

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ARTICLES OF INCORPORATION
OF
SAN FRANCIS MEDICAL CENTER, INC.

ARTICLE I - NAME

The name of this corporation is: SAN FRANCIS MEDICAL CENTER, INC.

ARTICLE II - DURATION

This corporation shall have perpetual existence, unless sooner dissolved in accordance with the laws of the State of Florida. Corporate existence shall commence at the time of the filing of the articles by the Department of the State, State of Florida.

ARTICLE III - PURPOSE

This corporation is organized for the purpose of transacting any and all lawful business.

ARTICLE IV - CAPITAL STOCK

This corporation is authorized to issue 500 shares of One Dollars - - - - - 00/100 - (\$ 1.00) par value common stock which shall be designated "COMMON SHARES".

ARTICLE V - PREEMPTIVE RIGHTS

Every shareholder, upon the sale for cash of any new stock of this corporation of the same kind, class or series as that which he already holds, shall have the right to purchase his pro-rata share thereof (as nearly as may be done without issuance of fractional shares) at the price at which it is offered to others.

ARTICLE VI - INITIAL REGISTERED OFFICE AND AGENT

The initial and principal place of business of this corporation shall be at 8572 S.W. 8th. Street - Miami - Fl 33144 - -
The registered agent of this corporation shall be Gladys B. Trujillo - - - and the street address shall be located at 8572 S.W. 8th. Street Miami - - Fl 33144.

Prepared By: Gladys B. Trujillo
8572 S.W. 8th. St
Miami Fl 33144
(305) 559-4165

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE VII - INITIAL BOARD OF DIRECTORS

This corporation shall have Two directors(s) initially. The number of directors may be either increased or diminished from time to time by the bylaws but shall never be less than one. The name(s) and address(es) of the initial director(s) of this corporation is(are):

Juan J. Cardenas
13379 NW 2nd. Terr
Miami Fl 33182

Gladys B. Trujillo
12984 SW 55th. St.
Miami Fl 33175

ARTICLE VIII - INCORPORATORS

The name and address of the each incorporator are:

Juan J. Cardenas
13379 NW 2nd. Terr
Miami Fl 33182

Gladys B. Trujillo
12984 SW 55th. St.
Miami Fl 33175

ARTICLE IX - BYLAWS

The power to adopt, alter, amend or repeal bylaws shall be vested in the board of directors and the shareholders.

ARTICLE X - CALLING OF SPECIAL MEETINGS

Special meetings of shareholders may be called by the board of directors or the holders of not more than one tenth of all the shares entitled to vote at the meeting.

ARTICLE XI - SHAREHOLDERS QUORUM AND VOTING

The majority of the shares entitled to vote, represented in person or by proxy, shall constitute a quorum at a meeting of shareholders.

If a quorum is present, the affirmative vote of the majority of the shares represented at the meeting and entitled to vote on the subject matter shall be the act of the shareholders.

ARTICLE XII - APPROVAL OF SHAREHOLDERS REQUIRED FOR MERGER

The approval of the shareholders of this corporation to any plan of merger shall be required in every case, whether or not such approval is required by law.



ARTICLE XIII - CAPITAL AMOUNT

The amount of capital with which this corporation shall commence business shall not be less than Five Hundred Dollars . . 00/100 - - - (\$ 500.00).

ARTICLE XIV - INDEMNIFICATION

The corporation reserves the right to amend or repeal any provision contained in these articles of incorporation, or any amendment hereto, and any right conferred upon the shareholders is subject to this reservation.

In witness whereof, the undersigned subscribers have executed these articles of incorporation this 6 day of February - of 1996.

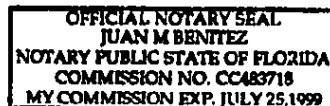
President	<u></u> (seal)
Vice President	<u>Juan J. Cardenas</u> (seal)
Secretary	<u></u> (seal)
	<u>Gladys B. Trujillo</u>


STATE OF FLORIDA }
COUNTY OF DADE } SS:

Before me, a notary public authorized to take acknowledgement in the state and county set forth above, personally appeared: Juan J. Cardenas and Gladys B. Trujillo - - - - -

Known to me and known by me to the person(s) who executed the foregoing articles of incorporation, and he(they) acknowledged before me that he(they) executed those articles of incorporation.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal, in the state and county aforesaid, this 6 - - day of February, 1996.




Juan M. Benitez
NOTARY PUBLIC
STATE OF FLORIDA AT LARGE

**CERTIFICATE DESIGNATING
REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of section 607.325, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registers office/registered agent, in the State of Florida.

1. The name of the corporation is: San Francis Medical Center, Inc. _____
2. The name and address of the registered agent and office is:
8572 S.W. 8th. St. _____
Miami _____
(P.O. BOX NOT ACCEPTABLE)
Florida - 33144 _____
(CITY/STATE/ZIP)

SIGNATURE 
(Corporate Officer)

TITLE President

DATE: February 6, 1996

HAVING BEEN NAMED TO ACCEPT SERVICE OF 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 
(Registered Agent)

DATE: February 6, 1996

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

P96000012742

SAN FRANCIS MEDICAL CENTER
6572 S.W. 8th St. • Miami, FL 33144
Ph.: (305) 266-3818 • Fax: 266-2268

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. _____
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

- ☐ Walk in ☐ Pick up time _____ ☐ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

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OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

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TALLAHASSEE, FLORIDA
STATE

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Linda*

Florida Department of State, Sandra B. Morham, Secretary of State

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT
OR BOTH FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, the undersigned corporation organized under the laws of the State of Florida submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1a. The name of the corporation is: San Francis Medical Center, Inc.

1b. The mailing address of the corporation is: 8572 SW 8th Street, Miami, FL 33144

1c. Date of incorporation: 02/09/96 Document number: P96000012742

2. The name and address of the current registered agent and office:

Gladys B. Trujillo

8572 SW 8th Street

Miami, FL 33144

3. The name and address of the new registered agent and office: (P.O. Box Not Acceptable)

Juan Jose Cardenas

8572 SW 8th Street

Miami, FL 33144

The street address of its registered office and the street address of the business office of its registered agent, as changed, will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board.

X [Signature]
(Signature of an officer, chairman or
vice chairman of the board)

11/14/96
(Date)

Juan Jose Cardenas, President

(Printed or typed name and title)

Having been named as registered agent and to accept service of process for the above stated corporation, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent.

X [Signature]
(Signature of Registered Agent)

11/14/96
(Date)

If signing on behalf of an entity:

(Typed or Printed Name)

(Capacity)

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314