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TO: DIVISION OF CORPORATIONS
DEPARTMENT OF STATE
STATE OF FLORIDA
409 EAST GAINES STREET
TALLAHASSEE, FL 32399
FAX: (904) 922-4000

FROM: RUDEN, MCCLOSKY, SMITH, SCHUSTER &
200 E BROWARD BLVD
PO BOX 1900
FT LAUDERDALE FL 33302 0000
CONTACT: ANNE MARIE LA FERLA
PHONE: (305) 527-6221
FAX: (305) 764-4996

(((H96000003630))) DOCUMENT TYPE: FLORIDA PROFIT CORPORATION OR P.A.
NAME: TENET HIALEAH HEALTHSYSTEM, INC.

FAX AUDIT NUMBER: H96000003630 CURRENT STATUS: REQUESTED
DATE REQUESTED: 03/14/1996 TIME REQUESTED: 10:50:26
CERTIFIED COPIES: 1 CERTIFICATE OF STATUS: 0
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TALLAHASSEE, FLORIDA

3/15

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ARTICLES OF INCORPORATION
OF
TENET HIALEAH HEALTHSYSTEM, INC.

The undersigned incorporator does hereby make, subscribe, file and acknowledge these Articles of Incorporation for the purpose of organizing a corporation under the Florida Business Corporation Act.

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ARTICLE I
NAME OF CORPORATION

The name of this Corporation shall be:

Tenet Hialeah HealthSystem, Inc.

ARTICLE II
PRINCIPAL OFFICE AND MAILING ADDRESS

The mailing address and the principal office of this Corporation is 651 East 25th Street, Hialeah, Florida 33013.

ARTICLE III
AUTHORIZED SHARES

The total authorized capital stock of this Corporation shall consist of 10,000 shares of Common Stock, par value $.01 per share.

ARTICLE IV
ADDRESS OF REGISTERED OFFICE IN THIS STATE

The street address of the initial registered office of this Corporation in the State of Florida is 200 East Broward Boulevard, Ft. Lauderdale, Florida 33301, and the initial registered agent of this Corporation at that address shall be David F. Parish.

Prepared by: David F. Parish, Esq., FL Bar #275786
Ruden McClosky, Et al, P. O. Box 1900
Fort Lauderdale, Florida 33301
(954) 764-6660

ARTICLE V

INCORPORATOR

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

David F. Parish
200 East Broward Boulevard
Ft. Lauderdale, Florida 33301

IN WITNESS WHEREOF, I have hereunto subscribed my hand and seal this 14th day of March, 1996.

David F. Parish, Incorporator

THE UNDERSIGNED, named as the registered agent in Article IV of these Articles of Incorporation, hereby accepts the appointment as such registered agent, and acknowledges that he is familiar with, and accepts the obligations imposed upon registered agents under, the Florida Business Corporation Act, including specifically Section 607.0505.

David F. Parish, Registered Agent

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TALLAHASSEE, FLORIDA

Prepared by: David F. Parish, Esq., FL Bar #275786
Ruden McClosky, Et al, P. O. Box 1900
Fort Lauderdale, Florida 33301
(954) 764-6660

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Document Number Only

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Requestor's Name

660 East Jefferson Street

Address

Tallahassee, Florida 32301

City State Zip Phone

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CORPORATION(S) NAME

Tenet Hialeah Healthsystem, Inc.

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TALLAHASSEE, FLORIDA

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( ) NonProfit
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CR2E031 (1-89)

Florida Department of State, Jim Smith, 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: TENET HIALEAH HEALTHSYSTEM, INC.

1b. Date of incorporation 3/14/96 Document number P96000023285

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

David F. Parish

200 East Broward Blvd., Ft. Lauderdale, FL 33301

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TALLAHASSEE FLORIDA

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

C T CORPORATION SYSTEM

c/o C T CORPORATION SYSTEM, 1200 South Pine Island Rd., Plantation, Florida 33324

The street address of its registered agent 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.

Scott M Brown
SIGNATURE

Scott M. Brown, Secretary
Typed or printed name and title

March 19, 1997
DATE

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

C T CORPORATION SYSTEM

SIGNATURE BY: M. Fitzpatrick
(Registered Agent) Margaret FitzPatrick Asst. Sec.

DATE 3/21/97

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

CR2E045 (7-91)
(FLA. - 2194 - 3/4/92)

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