

7/16/96  
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TO: DIVISION OF CORPORATIONS  
DEPARTMENT OF STATE  
STATE OF FLORIDA  
409 EAST GAINES STREET  
TALLAHASSEE, FL 32399

FROM: FAS-1 CORP. AGENT, INC.  
8405 NW 53RD ST  
SUITE C-100  
MIAMI FL 33166- 3710-

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DOCUMENT TYPE: FLORIDA PROFIT CORPORATION OR P.A.

NAME: ADY'S AMERICAN MEDICAL CENTER, CORP.

FAX AUDIT NUMBER: H96000009852

CURRENT STATUS: REQUESTED

DATE REQUESTED: 07/16/1996

TIME REQUESTED: 12:41:54

CERTIFIED COPIES: 0

CERTIFICATE OF STATUS: 1

NUMBER OF F 'S: 3

METHOD OF DELIVERY: FAX

ESTIMATED CHARGE: \$78.75

ACCOUNT NUMBER: 071001002335

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\*\* ENTER 'M' FOR MENU. \*\*

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TALLAHASSEE, FLORIDA



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DIVISION OF CORPORATIONS

**ARTICLES OF INCORPORATION  
OF  
ADY'S AMERICAN MEDICAL CENTER, CORP.**

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

96 JUL 16 PM 5:33

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The undersigned, incorporator(s), for 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 will be: ADY'S AMERICAN MEDICAL CENTER, CORP. The principal's place of business of this corporation will be:

1800 West 49th St. Ste. 324Q-1  
Hialeah, FL 33012.

**ARTICLE II NATURE OF BUSINESS**

This corporation I engage in or transact any or all lawful 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 outstandingly at any one time is: 500 (five hundred).

**ARTICLE IV TERM OF EXISTENCE**

This corporation is to exist perpetually.

Prepared by: Leopoldo C Mestre  
6709 West 15 Court  
Hialeah, FL 33143  
305-826-8092

**ARTICLE VI INCORPORATOR(S)**

The name(s) and street address(es) of the incorporator(s) to this articles of incorporation is(are):

Leopoldo C Mestre/President  
6709 West 15 Court  
Hialeah, Fl 33012

**IN WITNESS WHEREOF**, the undersigned incorporator(s) has(have) executed these Articles of incorporation this 09 Day of July, 1996.

Signature(s) of Incorporator(s)

Leopoldo C Mestre

  
President

**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

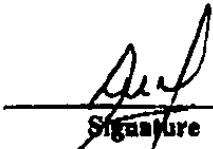
PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES,  
THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAW OF THE  
STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN  
DESIGNATING THE REGISTERS OFFICE/REGISTERED AGENT, IN THE STATE  
OF FLORIDA.

The name of the corporation is: ADY'S AMERICAN MEDICAL CENTER, CORP.

The name and address of the registered agent an office is:

Leopoldo C Mestre  
1800 W 49th St. Ste.324Q-1  
Hialeah, FL 33012

Having been named as registered agent and to accept services 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 relating to the proper and complete performance of my  
duties, and I am familiar with and accept the obligations of my position as registered agent.

  
Signature

July, 02 1996  
Date

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