

(((H96000018145 8)))

DIVISION OF CORPORATIONS

FAX #: (904)922-4001

FROM: EMPIRE CORPORATE KIT COMPANY

ACCT#: 072450003255

CONTACT: RAY STORMONT PHONE: (305)541-3694

FAX #: (305)541-3770

NAME: PINES MEDICAL CENTER, INC.

AUDIT NUMBER...... H96000018145

DOC TYPE ..... FLORIDA PROFIT CORPORATION OR P.A.

CERT. OF STATUS...0

PAGES..... 5

CERT. COPIES.....1 DEL.METHOD. FAX
EST.CHARGE. \$122.50
NOTE: PLEASE PRINT THIS PAGE AND USE IT AS A COVER SHEET. TYPE THE FAX

AUDIT NUMBER ON THE TOP AND BOTTOM OF ALL PAGES OF THE DOCUMENT

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

ENTER SELECTION AND <CR>: Help F1 Option Menu F2

NUM CAPS Connect: 00:02:39

<u>or</u>

## PINES MEDICAL CRATER, INC.

HP6000018145

ARTICLE I - NAME

The name of this corporation is:

## PINES MEDICAL CENTER, INC.

ARTICLE II - DURATION

This corporation shall have perpetual existence.

ARTICLE III - PURPOSE

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

## ARTICLE IV - CAPITAL STOCK

This corporation is authorized to issue 100 shares of \$10.00 par value common stock.

## ARTICLE V - PRE-KAPTIVE 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 prorata 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 PRINCIPAL OFFICE AND REGISTERED AGEST

The street address of the initial principal office of the corporation is 7845 PINES BOULEVARD, BROWARD COUNTY, PEMEROKE PINES, FLORIDA 33024, and registered office of the corporation is 2929 EAST COMMERCIAL BOULEVARD, BARNETT HANK TOWER, PENTHOUSE SUITE A, FT. LAUDERDALE, PLORIDA 33308, BROWARD COUNTY and the name of the initial Registered Agent of the corporation is JOSEPH A. VECCHIO, JR.

Joseph A. Vecchio, Jr.
BEGGS & VECCHIO
ATTORNBYS AT LAW
Barnett Bank Tower
Penthouse Suite A
2929 E. Commercial Blvd.
Ft. Lauderdale, Florida 33308
PH: 305 772 5132
Fla. Bar 158848

DEC-30-1996 14:40

EMPIRE CORPORATE KIT

ARTICLE VII - INITIAL BOARD OF DIRECTORS ---- --- ---- 14001014

This corporation shall have 1 DIRECTOR initially. The number of Directors may be either increased or diminished from time to time by the By-Laws, but shall never be less than one. The names and addresses of the initial Directors of this corporation are:

MAME

**ADDRESS** 

PASQUALE DELL'API

7845 PINES BLVD. PEMBROKE PINES, PL. 33024

#### ARTICLE VIII - OFFICERS

The names and addresses of the officers of the corporation until the election at the first annual election of officers and their qualification are as follows:

NAME

ADDRESS

OFFICE

PASQUALE DELL'API

7845 PINES BLVD. PEMBROKE PINES, FL. 33024 PRESIDENT SECRETARY

#### ARTICLE IX - INCORPORATION

The names and addresses of the parson signing these Articles is:

NAME

ADDRESS

JOSEPH A. VECCHIO

2929 B. COMMERCIAL BLVD. BARNETT BANK TOWER - PH. A FT. LAUDERDALE, FLA. 33308

#### ARTICLE X - INDEMNIFICATION

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

### ARTICLE XI - AMERICANT

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 shareholders is subject to this reservation.

H96 QQQQ18145

IN WITNESS WHEREOF, the undersigned subscriber has executed these Articles of Incorporation this 30TH. DAY OF DECEMBER 1996.

SUBSCRIBER VECCHIO, JR.

STATE OF FLORIDA )
COUNTY OF BROWARD )

THEREBY CERTIFY that on this day before me, an officer duly qualified to take acknowledgments, personally appeared JOSEPH A. VECCHIO, JR., to me known to be the person described in and has produced a drivers license as identification, who did take an oath, and who executed the foregoing instrument and acknowledged before me that they executed the same.

WITNESS my hand and official seal in the County and State last

aforesaid this 30TH. DAY OF DECEMBER 1996.

MY COMMISSION EXPIRES:

Accident L. Principii A. M.Y. CORRESSION & CCRRICES DOPINSS . Contra vol. 2000 EMERSTO THO THE RESIDENCE, ED.

H96 000018145

CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR SERVICE OF PROCESS WITHIN THIS STATE, NAMING AGENT UPON WEOM PROCESS MAY BE SERVED

In pursuant to Chapter 48.091, Florida Statutes, the following is submitted, in compliance with said Act:

That PINES MEDICAL CENTER, INC., desiring to organize under the laws of the State of Florida with its principal office as indicated in the Articles of Incorporation at the City of PEMEROKE PINES, BROWARD COUNTY, FLORIDA has named JOSEPH A. VECCHIO, JR. located at 2929 B. COMMERCIAL BLVD., BARNETT BANK TOWER, PENTHOUSE SUITS A, FT. LAUDERDALE, FLORIDA 23308 as its agent to accept service of process within this State.

#### **ACIONOMIED GARRIET**

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 provisions of said Act relative to keeping open said office.

JOSEPH A. VECCHIO, JE

H96 000018145