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(((H97000004855 7)))

TO: DIVISION OF CORPORATIONS

FAX #: (904)922-4001

FROM: FAS-T CORP. AGENTS, INC.

ACCT#: 071001002335

CONTACT: LIDIA FERNANDEZ

FAX #: (305)716-0346

PHONE: (305)599-0839

NAME: SHALOM PROFESSIONAL GROUP, INC.

AUDIT NUMBER..... H97000004855

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

CERT. OF STATUS.. 0

PAGES..... 3

CERT. COPIES.....1

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** ENTER 'M' FOR MENU. **

97 MAR 24 PM 3: 0 SECRETARY OF STATE

RECEIVED OF STATE THINK SECRETARSEE, PLORIDA SECRETARSEE, PROTECTURA SECRETARSEE,



ARTICLES OF INCORPORATION

97 MAR 24 PM 3: 00
TALLAHASSEE, FLORIDA

SHAMMAH PROFESSIONAL HEALTH GROUP, INC.

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

ARTICLE ! NAME

The name of the corporation shall be: SHAMMAH PROFESSIONAL HEALTH GROUP. INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

8316 NW 103 ST. HIALEAH GARDEN, FL 33016

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

1000 SHARES AT \$ 1 PAR VALUE

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

ELENA ROSLES 8316 NW 103 ST. HIALEAH GARDEN, FL 33016

Prepared by: Elena Robles 8316 NW 103rd St. Hisleah Gardens, FL 33016 (305) 819-0109

ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is (are):

ELENA ROBLES 6318 NW 103 ST. HIALEAH GARDEN, FL 33016

The undersigned incorporator(s) has(have) executed these Articles of incorporation this

day of MARCH 1997

Class Signature

Signature

The foregoing instrument was addrewledged before me this day of 1997.

Notary Public.

ARTICLES OF INCORPORATION FILLING FEE - \$35

FILED

97 MAR 24 PH 3: 00

SECRETARY OF STATE TALLAHASSEE, FLORIDA

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 or 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

. The name of the corporation	Is: SHAMMAH PROFESSIONAL HEALTH GROUP, INC.
The name and address of the	registered agent and office is:
	ELENA ROBLES
	(Name)
•	9316 NW 103 ST.
•	(P.O. Box <u>not</u> acceptable)
	HIALEAH GARDEN, FL 33016
	(City/State/Zip)

Having been named as registered agent and to accept service of process for the above state 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)

03/24/97 (Date)

DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314