

LAZARUS CORPORATE INDUSTRIES, INC.

Requestor's Name

89 S. S. W. E. 1/4

Address

AMITY, FLORIDA 32114 (800) 552-5973

City/State/Zip

Phone #

LOCAL REPRESENTATIVE TALLAHASSEE

Office Use Only

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

1. WEXLER MEDICAL GROUP, CORP.
(Corporation Name) (Document #)

2. _____
(Corporation Name) (Document #)

3. _____
(Corporation Name) (Document #)

4. _____
(Corporation Name) (Document #)

1-800-217-1011
-05/08/97--01025--021
****122.50 ****122.50

☒ Walk in

☒ Pick up time 2:00

☒ Certified Copy

☐ Mail out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

NEW FILINGS	
<input checked="" 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

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

RECEIVED
97 MAY -8 AM 10:57 MAY -8 PM 3:50
DIVISION OF CORPORATION
TALLAHASSEE, FLORIDA

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

Pursuant to the provisions of sections 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.

1. The name of the corporation is:
Wexler Medical Group, Corp.
2. The name and address of the registered agent and office is:
Jorge Luis Rodriguez
4763 West Flagler Street
Miami, Florida 33126

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 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

Jorge Luis Rodriguez

DATE

5/1/98

REGISTERED AGENT FILING FEE. \$35.00

97 MAY -8 PM 3:50

ARTICLES OF INCORPORATION

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.

97 MAY -8 PM 3:50

ARTICLE I NAME

The name of the corporation shall be:

WEXLER MEDICAL GROUP, INC.

ARTICLE II PRINCIPAL OFFICE

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

4700 N.W. 7 STREET , SUITE 237
MIAMI, FLORIDA 33126

ARTICLE III SHARES

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

500 SHARES

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

JORGE LUIS RODRIGUEZ
4763 WEST FLAGLER TERRACE
MIAMI, FLORIDA 33126

ARTICLE V INCORPORATORS

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

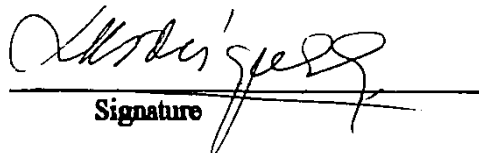
JORGE LUIS RODRIGUEZ
4763 WEST FLAGLER TERRACE
MIAMI, FLORIDA 33126

ARTICLE VI DIRECTORS

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

JORGE LUIS RODRIGUEZ
4763 WEST FLAGLER TERRACE
MIAMI, FLORIDA 33126

The undersigned incorporator has executed these Articles of Incorporation this 1 day of May 1997.


Signature