

**99-10044587**

FLORIDA REGISTERED AGENT  
 800 S.W. 87 AVENUE, SUITE 100  
 MIAMI, FLORIDA 33174 (305) 552-5973

City/State/Zip Phone #  
 LOCAL REPRESENTATIVE TALLAHASSEE

Office Use Only

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

1. PHYSICIAN 2000, INC.  
 (Corporation Name) (Document #)
2. \_\_\_\_\_  
 (Corporation Name) (Document #)
3. \_\_\_\_\_  
 (Corporation Name) (Document #)
4. \_\_\_\_\_  
 (Corporation Name) (Document #)

- ☒ 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

100002185001--0  
 -05/20/97--01052--026  
 \*\*\*\*122.50 \*\*\*\*122.50

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

*3/30*

05/20/97 10:05  
 OFFICE OF REVENUE

Examiner's Initials	
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ARTICLES OF INCORPORATIONOF

PHYSICIAN 2000, 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 I NAME

The name of the corporation shall be. Physician 2000, Inc

ARTICLE II PRINCIPAL OFFICE

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

2601 SW 37 Ave Suite 702  
Miami, Florida 33133

ARTICLE III CAPITAL STOCK

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

500 Shares of floating stock.

ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:

Aniceto Munoz MD  
2601 SW 37 Ave Suite 702  
Miami, Florida 33133

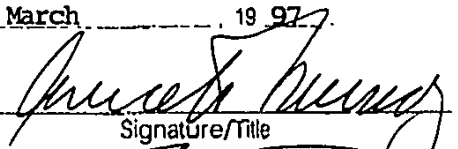
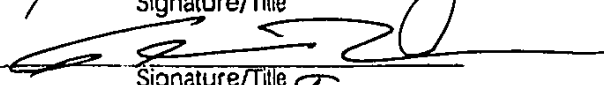
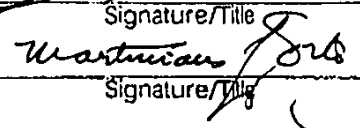
ARTICLE V. INCORPORATOR(S)

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

Aniceto Munoz 2601 SW 37 Ave Suite 702, Miami, Florida 33133  
Martiniano Orta " " " " " " " "  
Frank Depena 11880 Bird Rd. Suite 119, Miami, Florida 33175

The undersigned has(have) executed these Articles of Incorporation this

\_\_\_\_ 21 \_\_\_\_ day of \_\_\_\_ March \_\_\_\_ , 19 97 \_\_\_\_.

  
\_\_\_\_\_  
Signature/Title  
  
\_\_\_\_\_  
Signature/Title  
  
\_\_\_\_\_  
Signature/Title

CERTIFICATE OF DESIGNATION  
REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section 607.0501, 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 Physician 2000, Inc.
2. The name and address of the registered agent and office is:  
Aniceto Munoz MD  
(NAME)  
2601 SW 37 Ave Suite 702  
(P.O. BOX NOT ACCEPTABLE)  
Miami, Florida 33133  
(CITY/STATE/ZIP)

SIGNATURE

(corporate officer)

TITLE

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 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

DATE

REGISTERED AGENT FILING FEE: \$35.00

97 MAY 20 PM 12:47  
FILED  
TALLAHASSEE  
FLORIDA