97 JUL -7 PH 2: 21 Address TALLAHASSEE, FLORIDA City/State/Zip Phone # Office Use Only CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): (Corporation Name) MeDICAL (RRE SYSTEMS, CORP. (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) □ Walk in Pick up time Certified Copy Photocopy ☐ Mail out Will wait Certificate of Status AMENDMENTS NEW FILINGS Profit Amendment NonProfit Resignation of R.A., Officer/Director Limited Liability Change of Registered Agent Domestication Dissolution/Withdrawal Other Merger OTHER FILINGS REGISTRATION QUALIFICATION Annual Report Foreign Fictitious Name Limited Partnership Name Reservation Reinstatement Trademark Other

Examiner's Initials



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

June 26, 1997

CECILIA ZURITA 1945 SW 81ST WAY DAVIE, FL 33324 北ろのち)858~ 67 00 SUBJECT: PREVENTIVE MEDICAL CARE SYSTEMS, CORP. Ref. Number: W97000014816

We have received your document for PREVENTIVE MEDICAL CARE SYSTEMS, CORP. and your check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

According to section 607.0202(1)(b) or 617.0202(1)(b), Florida Statutes, you must list the corporation's principal office, and if different, a mailing address in the document. If the principal address and the registered office address are the same, please indicate so in your document.

The document must contain written acceptance by the registered agent, (i.e. "I hereby am familiar with and accept the duties and responsibilities as registered agent for said corporation"); and the registered agent's signature.

Corporations may file using only the corporate name. Please delete any reference to the "doing business as name" in your document. If you wish to register your fictitious name, you may do so by filing the enclosed application and submitting the appropriate fees to this office.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6915.

Pamela Hall Document Specialist

Letter Number: 497A00033668

July 2, 1997

Florida Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL. 32314

Attn. Pam Hall

Dear Ms. Hall:

Enclosed, please find the Articles of Incorporation of Preventive Medical Care Systems, Corp. amended, as per your instructions.

Your cooperation in this matter is greatly appreciated

Very truly yours,

Preventive Medical Care Systems, Corp.

Cecilia Zurita

Register Agent

ARTICLES OF INCORPORATION

FILED

OF

97 JUL -7 PH 2: 26

PREVENTIVE MEDICAL CARE SYSTEMS, CORP. TALLAHASSEE, FLORIDA

The undersigned subscribers to these Articles of Incorporation, each natural person competent to contract, hereby associate themselves together to form a corporation under the laws of the State of Florida.

ARTICLE I

NAME:

The name of this corporation is: "PREVENTIVE MEDICAL CARE SYSTEMS, CORP."

ARTICLE II

NATURE OF BUSINESS:

The general nature of business to be transacted by this corporation is: To engage in any activity of business permitted under the Laws of the United States of America and the State of Florida.

ARTICLE III

CAPITAL STOCK:

The maximum number of shares of stock that this corporation is authorized to have outstanding at any one time is: ONE HUNDRED shares at no par value.

ARTICLE IV

INITIAL CAPITAL:

The amount of capital with which this corporation will begin business is not less that Five Hundred Dollars (\$500.00).

ARTICLE V

TERM OF EXISTENCE:

This corporation is to exist perpetually.

ARTICLE VI

ADDRESS:

The initial address of the principal office of this corporation in the State of Florida is Post Office Box 330097 Miami, Florida 33233. By majority vote of stockholders, or if created, by action of the Board of Directors, the principal office may from time to time, be moved to any other address in Florida.

ARTICLE VII

MANAGEMENT BY STOCKHOLDERS:

The business of this corporation shall be initially managed by its stockholders rather than by a Board of Directors. This shall not prohibit the stockholders from creating a Board of Directors, by majority vote, to manage the business of the corporation as may be provided by the by-laws.

ARTICLE VIII

SUBSCRIBERS:

The name and post office address of each subscriber of these Articles of Incorporation are:

Cecilia Zurita: 1945 SW 81st Way, Davie, Fl 33324

ARTICLE IX

RESIDENT AGENT:

The name and post office address of the Resident Agent of the Corporation is: Cecilia Zurita 1945 SAW 81st Way, Davie, Florida 33324

STATE OF FLORIDA

COUNTY OF DADE

I HEREBY CERTIFY that on this day before me, a Notary Public duly authorized in the State and County named above to take acknowledgment, personally appeared.

CECILIA ZURITA described as subscriber in and who executed the foregoing Articles of Incorporation and acknowledged before me that they subscribed to those Articles of Incorporation.

WITNESS my hand and official seal in the County and State named above on this 97 Z (day of June, 19'. `.

OFFICIAL NOTARY SEAL
GEORGE C. ADERHOLD
HOTARY PUBLIC STATE OF FLORIDA
COMMISSION NO. CC 632839
MY COMMISSION EXPIRES 3/25/2001

NOTARY PUBLIC

ARTICLE X

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AMENDMENT:

TALLAHASSEE, FLORIDA

These Articles of Incorporation may be amended in the manner provided by law. Every amendment shall be approved by a majority vote of the stockholders or if created, by the Board of Directors, proposed by them to the stockholders, and approved at a stockholders' meeting by a majority of the stock entitled to vote thereon, unless all the stockholders, and if a Board of Directors is created, all the Directors sign a written statement manifesting their intention that a certain amendment of these Articles of Incorporation be made.

I hereby am familiar with and accept the duties and responsibilities as registered agent for said corporation

Cecilia Zurita

Incorporator/Registered Agent

Cecilia Zurita Resident Agent