| Julializate/Zij                                                                                                      | 20, Wy Address 723/2  ### 224-4/95 Phone #                                                                                                                                                                           | 97 OCT 23 PM 3: 44 SECRET/RY OF STATE TALLAHASSEE, FLORIDA                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
|----------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| CODPODATION N                                                                                                        | AME(S) & DOCUMENT NUM                                                                                                                                                                                                | Office Use Only  (BFR(S), (if known):                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
| 2(Corpor:                                                                                                            | ation Name) (D                                                                                                                                                                                                       | Coument #)  7 0 0 0 2 3 2 8 4 8 7 3 -10/23/9701097019 ******70.00 ******70.00  Coument #)  Curtified Copy                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| Profit NonProfit Limited Liability Domestication Other  OTHER FILINGS Annual Report Fictitious Name Name Reservation | AMENDMENTS  Amendment  Resignation of R.A., Officer/ Direct  Change of Registered Agent  Dissolution/Withdrawal  Merger  REGISTRATION/  QUALIFICATION  Foreign  Limited Partnership  Reinstatement  Trademark  Other | TOTAL |
| CR2E031(1/95)                                                                                                        |                                                                                                                                                                                                                      | Examiner's Initials                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |

**ARTICLES OF INCORPORATION** 

FILED

OF

97 OCT 23 PH 3: 44

BOOTH ASSOCIATES SE, INC.

SECRETARY OF STATE TALLAHASSEE, FLORIDA

### I. NAME

The name of the corporation is Booth Associates SE, Inc.

### II. NATURE OF BUSINESS

This corporation may engage in or transact any or all lawful activities or business permitted under the Laws of the United States, the State of Florida, or any other state, country, territory, or nation.

### III. CAPITAL STOCK

The maximum number of shares which this corporation is authorized to have outstanding at any time is One Hundred (100) of common stock having a par value of One Dollar (\$1.00) per share.

### IV. TERM OF EXISTENCE

This corporation is to exist perpetually.

### V. OFFICERS AND DIRECTORS

This corporation shall have two officers and two directors initially. The number of directors and officers may increase from time to time by an amendment of the by-laws of the corporation in the manner provided by law.

The names and addresses of the initial directors and officers of this corporation are:

Name
Name
Title
Address
Hurley H. Booth, Jr.
Director & President
1124 Alachua Avenue, Tallahassee, Fl. 32308
Frances Booth-Sheffield
Secretary
1124 Alachua Avenue, Tallahassee, Fl. 32308

### VI. <u>INCORPORATOR</u>

The name and address of the Incorporator signing these Articles of Incorporation is Hurley H. Booth, Jr., 1124 Alachua Avenue, Tallahassee, Fl 32308. The initial address of the Corporation should be 1124 Alachua Avenue, Tallahassee, Fl. 32308.

FILED

#### VII. REGISTERED AGENT

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The name and address of the person designated as the Registered Agent signing these Articles of Incorporation is Hurley H. Booth, Jr., 1124 Alachua Avenue, Tallahassee, Fl. 32308 ECRETARIO OF STATE TALLAHASSEE, FLORIDA

### VIII. AMENDMENT OF ARTICLES

This corporation reserves the right to amend or repeal any provisions contained in these Articles of Incorporation, or any amendment thereto, and any right conferred upon the shareholders is subject to this reservation.

### IX ACCEPTANCE OF OFFICE OF REGISTERED AGENT

I HEREBY ACCEPT the appointment as registered agent for the corporation, <u>Booth Associates SE</u>, Inc. On this <u>22nd</u> day of <u>Octobter</u>, 1997, 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 am familiar with and accept the obligations of my position as registered agent.

Hurley H. Booth, Jr. Registered Agent and

Sole Incorporator

# (Address) (City, State, Zip) (Phone #) OFFICE USE ONLY CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): 1. ADVANCE MEDICAL OFFICE ofic. (Corporation Name) (Document #) (Corporation Name) (Document #) (Document #) (Corporation Name) (Document #) Pick up time **Certified Copy** Mail out Will wait Photocopy Certificate of Status AMENDMENTS **NEW FILINGS** Profit Amendment NonProfit Resignation of R.A., Officer/Director Change of Registered Agent Limited Liability Dissolution/Withdrawal Domestication Merger Other OTHER FILNGS REGISTRATION/ QUALIFICATION Annual Report Foreign Fictitious Name Limited Partnership Name Reservation Reinstatement Trademark

Other

Examiner's Initials

### 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.

ARTICLE 1 NAME

The name of the corporation shall be:

ADVANCE MEDICAL OFFICE INC.

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SECKETALY OF STATE
TALLAHASSEE, FLORIDA

### ARTICLE II PRINCIPAL OFFICE

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

8452 S.W. 24 ST. MIAMI, FL. 33155

### ARTICLE III SHARES

# ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

MARGARITA GONZALEZ 8452 S.W. 24 ST. MIAMI, FL. 33155

## ARTICLE V INCORPORATOR(S)

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

MARGARITA GONZALEZ GUIDO MUÑOZ 8452 S.W. 24 ST. MIAMI, FL. 33155

### ARTICLE VI DIRECTOR(S)

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

MARGARITA GONZALEZ (P)
GUIDO MUÑOZ (VP)
8452 S.W. 24 ST.
MIAMI, FL. 33155

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this \_\_\_\_\_\_\_ day of \_\_\_\_\_\_\_\_, 19\_\_\_\_\_.

Signature

Articles of Incorporation Filing Fee - \$35

# 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.

| The name of the corporation is:  | Advance Medical Office Inc. |
|----------------------------------|-----------------------------|
| The name and address of the regi | stered agent and office is: |
| MARGARI                          | TA GONZALEZ                 |
| (N)                              | AME)                        |
| 8452 S                           | .w. 24 ST.                  |
| (P.O. BOX <u>NO</u>              | CACCEPTABLE)                |
| MIAMI,                           | FL. 33155                   |
| (CITY/S                          | TATE/ZIP)                   |

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 Margania SEC. PH 3: 56

DATE

DATE

DATE

**REGISTERED AGENT FILING FEE: \$35.00**