TRISMITTALLET IR

August 25, 1997

Department of State Division of Corporations P.O. BOX 6327 Tallahassee, Florida 32314 000002348760--E -11/17/97--01083--015 ****122.50 ****122.50

Re: ANTONIA R. SAN JORGE, P.A.

Dear Sir or Madam:

Enclosed please find Articles of Incorporation and the Designation and Acceptance of Registered Agent for filing, together with our check in the amount of \$ 122.50 to cover the filing fee, certified copy charge, designation of registered agent, and charter tax.

I have also enclosed an additional copy of the Articles of Incorporation which I would appreciate having certified and returned to the address below.

Sincerely,

Antonia R. San Jorge, M.D.

c/o Michael W. Dwyer 5965 Southwest 8th Street Miami, Florida 33144

1-305-264-4456

Encl: (1) copy of Articles

check for \$ 122.50

Self Addressed Stamped envelope

FILED
7 DEC 11 PN 1:4
ECRETARY OF STATE

College Colleg



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

November 19, 1997

ANTONIA R. SAN JORGE, M.D. 5965 SOUTHWEST 8TH STREET MIAMI, FL 33144

SUBJECT: ANTONIA R. SAN JORGE, P.A.

Ref. Number: W97000026181

We have received your document for ANTONIA R. SAN JORGE, P.A. and your check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The specific nature of business of the professional association must be stated in the document.

Please return the original and one copy of 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 (850) 487-6933.

Dana Calloway Document Specialist

Letter Number: 697A00055538



ARTICLES OF INCORPORATION OF ANTONIA R. SAN JORGE, P.A.

The undersigned subscriber to these Articles of Incorporation, a natural person competent to contract, hereby forms a professional corporation under the laws of the State of Florida.

ARTICLE I NAME

The name of the professional corporation shall be: ANTONIA R. SAN JORGE, P.A.

ARTICLE II PRINCIPAL OFFICE

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

ANTONIA R. SAN JORGE, P.A. 8940 North Kendall Drive Suite # 905-E Miami, Florida 33173

ARTICLE III SHARES

The maximum number of shares of stock that this corporation is authorized to have outstanding at any one time is 1000 shares of common stock having a par value of \$1.00 per share.

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name of the registered agent and the street address of the initial registered office of the corporation shall be:

ANTONIA R. SAN JORGE, M.D. 8940 North Kendall Drive, Suite # 905-E Miami, Florida 33173

ARTICLE V <u>INCORPORATORS</u>

The name and address of the incorporator is:

ANTONIA R. SAN JORGE, M.D. 11351 Southwest 61st Street Miami, Florida 33173

ARTICLE VI SPECIFIC NATURE OF BUSINESS OF P.A.

The specific nature of the business of ANTONIA R. SAN JORGE, M.D. is:

A Doctor of Medicine specializing in pediatric infectious diseases.

IN WITNESS WHEREOF, the undersigned have hereunto set their hand and seal on this day of December, 1997.

Incorporator:

ANTONIA R. SAN JORGE, M.D.

ANTONIA R. BAIN JOROL, M.

STATE OF FLORIDA COUNTY OF DADE

The foregoing instrument was executed and acknowledged before me this day of December, 1997, by ANTONIA R. SAN JORGE, M.D., who is personally known by me or who has produced the following type of identification personal persona

Notary Public

State of FLORIDA

My Commission Expires: OCF, 26, 1999,

**

MICHAEL W DWYER My Commission CC505989 Expires Oct. 26, 1999

CERTIFICATION OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF § 607.0501, FLORIDA STATUTES, THE UNDERSIGNED PROFESSIONAL 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 professional corporation is: ANTONIA R. SAN JORGE, P.A.
- 2. The name and address of the registered agent and office is:

Antonia R. San Jorge, M.D. 8940 North Kendall Drive Suite # 905-E Miami, Florida 33173

ACCEPTANCE:

Having been named as Registered Agent to accept service of process for the above stated professional 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.

Registered Agent:

ANTONIA R. SAN JORGE, M.D. - signature

December , !

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7 DEC | | PM |: 4
ECRETARY O STATE
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