

P98 000014894

TRANSMITTAL LETTER

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

FILED
98 FEB 13 PM 9:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SUBJECT: ABIOMED MEDICAL PROFESSIONAL GROUP, INC.
(Proposed corporate name - must include suffix)

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

☐ \$70.00
Filing Fee

☐ \$78.75
Filing Fee
& Certificate

☒ \$122.50
Filing Fee
& Certified Copy

☐ \$131.25
Filing Fee,
Certified Copy
& Certificate

ADDITIONAL COPY REQUIRED

FROM: YVETTE LOPEZ
Name (Printed or typed)

5769 N.W. 7th STREET, SUITE 221
Address

MIAMI, FLA 33126
City, State & Zip

(305) 389-8885
Daytime Telephone number

9000002430029--6
-02/13/98-01038-013
****122.50 ****122.50

NOTE: Please provide the original and one copy of the articles.

CB
2-16-98

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 I NAME

The name of the corporation shall be:

ABIOMED MEDICAL PROFESSIONAL GROUP, INC.

ARTICLE II PRINCIPAL OFFICE

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

5769 N.W. 7th STREET, SUITE 221
MIAMI, FLA 33126

ARTICLE III SHARES

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

1000 SHARES COMMON STOCK NPV

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

YVETTE LOPEZ
5769 N.W. 7th STREET, SUITE 221
MIAMI, FLA 33126

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ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

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

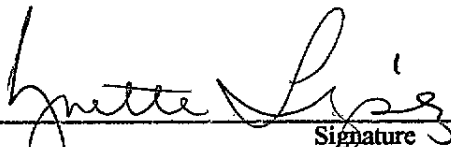
YVETTE LOPEZ Vice President
5769 N.W. 7th STREET, SUITE 221
MIAMI, FLA 33126

FRANCISCO A. DIAZ President/Officer
1825 PONCE DE LEON BLVD., STE 335
CORAL GABLES, FLA 33134
1000 Shares Common Stock NPV

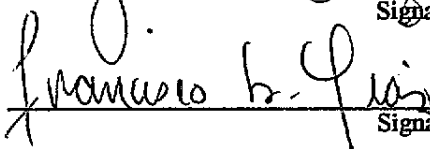
The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

09 day of FEBRUARY, 19 98

(An additional article must be added if an effective date is requested.)



Signature



Signature

Signature

Notarization is not required

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

**CERTIFICATE OF DESIGNATION OF
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 ABIOMED MEDICAL PROFESSIONAL GROUP, INC.
2. The name and address of the registered agent and office is:

YVETTE LOPEZ

(NAME)

5769 N.W. 7th STREET, SUITE 221

(P. O. Box or Mail Drop Box NOT ACCEPTABLE)

MIAMI, FLA 33126

(CITY/STATE/ZIP)

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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)

02-09-98

(DATE)