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OFFICE USE ONLY (Document #) LAZARUS CORPORATE FILING SERVICE, INC. (Requestor's Name) 3320 S.W. 87th AVENUE (Address) (305)552-5973 MIAMI, FLORIDA (City, State, Zip) LOCAL REPRESENTATIVE TALLAHASSEE OFFICE USE ONLY CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known): (Corporation Name) (Document #) (Document #) (Corporation Name) (Corporation Name) (Document #) Pick up time Certified Copy Walk in Certificate of Status Photocopy Will wait Mail out AMENDMENTS NEW FILINGS Amendment **Profit** RECEIVED.
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DIVISION OF CORPORATION Resignation of R.A., Officer/Director NonProfit Change of Registered Agent Limited Liability Dissolution/Withdrawal Domestication Merger Other REGISTRATION! OTHER FILNGS QUALIFICATION **Annual Report** Foreign **Fictitious Name** Limited Partnership Name Reservation Reinstatement

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## **Articles of Incorporation**

The undersigned incorporators, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation:

Article I: The name of the Corporation

United Medical Services Association, Inc.

Article II: The principle place of business and mailing address of this corporation shall

be:

8080 W Flagler St. Suite 3A Miami, FL 33144

Article III: The number of shares of stock that this corporation is authorized to have

outstanding at any time is 100 shares, \$1 Par Value.

Article IV: The name and address of the initial registered agent is:

Pablo Silverio 9443 Fontainebleau Blvd # 108 Miami, FL 33172

Article V: The name and address of the incorporators to these articles of incorporation

are:

Pablo Silverio 9443 Fontainebleau Blvd # 108 Miami, FL 33172

Paul G. Silverio - Benet 9708 Hammocks Blvd # 104 Miami, FL 33196

Marcos Silverio 10479 SW 210 th Terrace Miami, FL 33189 98 MAR 12 PM 1: 56
SECRETARY OF STATE

The undersigned incorporators have executed these Articles of Incorporation this 2th day of February, 1998

Pablo Silverio

Paul G. Silverio Benet

Marcos Silverio

## CERTIFICATION 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:

- 1. The name of the corporation: United Medical Services Association, Inc.
- 2. The name and address of the registered agent and office is:

## Pablo Silverio 9443 Fontainebleau Blvd # 108 Miami, FL 33172

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT THE 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: SUMMEDON

DATE: February 2, 1998

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