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(Phone #)

LOCAL REPRESENTATIVE TALLAHASSEE

800002473778

-03/31/98-01066-011

****122.50 ****122.50

OFFICE USE ONLY

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. ALL CHILDREN MEDICAL CENTER, INC.
(Corporation Name) (Document #)

2. _____
(Corporation Name) (Document #)

3. _____
(Corporation Name) (Document #)

4. _____
(Corporation Name) (Document #)

☒ Walk in

☒ Pick up time 2:00

☒ Certified Copy

☐ Mail out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

NEW FILINGS	
<input checked="" type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

K. Rolfe MAR 31 1998

W98-7139

CR2E031(9/92)

Examiner's Initials

FILED RECEIVED

98 APR -1 PM 12:41

98 MAR 31 AM 11:45

SECRETARY OF STATE
TALLAHASSEE, FLORIDA DIVISION OF CORPORATION

4/1/98



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

March 31, 1998

LAZARUS

MIAMI, FL

SUBJECT: ALL CHILDREN MEDICAL CENTER, INC.
Ref. Number: W98000007139

We have received your document for ALL CHILDREN MEDICAL CENTER, INC. 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 registered agent designated in your document is not an active entity according to our records. Please reinstate this entity (call (850) 487-6059 for information) or designate another entity that is active according to our records.

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) 487-6932.

Kimberly Rolfe
Document Specialist

Letter Number: 498A00017116

RECEIVED
98 APR -1 AM 11:03
DIVISION OF CORPORATION

FILED

98 APR -1 PM 12:41
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION
OF
ALL CHILDREN MEDICAL CENTER, INC.

ARTICLE I
NAME

The name of the corporation is ALL CHILDREN MEDICAL CENTER, INC. (hereinafter called the "Corporation"). The purpose of this corporation is limited to engaging in every aspect of the practice of Medicine.

ARTICLE II
ADDRESS

The address of the principal office and the mailing address of the Corporation
999 North Krome Avenue, Homestead, Fl. 33030

ARTICLE III
PURPOSE

The general purpose of which the Corporation is organized is to engage in every aspect of the practice of Medicine. The professional services involved in the Corporation's practice of Medicine may be rendered only through its officers, agents and employees who are duly authorized and licensed to practice Medicine in the State of Florida.

The Corporation shall not engage in any business other than the practice of Medicine. However, the Corporation may invest its funds in real estate, mortgages, stocks, bonds and other types of investments and may own real and personal property necessary for the rendering of the professional services authorized hereby.

ARTICLES IV
CAPITAL STOCK

The capital stock authorized, par value thereof, and the characteristics of such shall be as follow:

Number of Shares Authorized	Par Value Per Share	Class of Stocks
500	1.00	Common

ARTICLE V
REGISTERED OFFICE AND AGENT

The street address of the Corporation's initial registered office in the State of Florida is 999 North Krome Avenue, Homestead, Fl. 33030 and the name of its registered agent is:

MARI CARMEN ORTIZ

ARTICLE VI
INCORPORATORS

The name of the Incorporators are:

LUCILA JOSEPHS, M.D.
052-46-4555
14504 S.W. 56TH TERRACE
MIAMI, FL. 33183

MARI CARMEN ORTIZ, P.A.
583-23-3528
1627 BRICKELL AVENUE #2703
MIAMI, FL. 33129

ARTICLE VII
INDEMNIFICATION

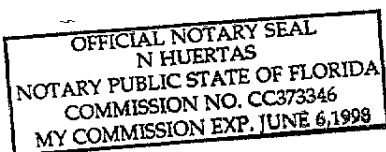
The Corporation shall indemnify and may advance expenses on behalf of its officers and directors to the fullest extent not prohibited by any law in existence either now or hereafter.

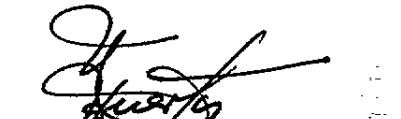
IN WITNESS WHEREOF, the undersigned, being the Incorporators named above for the purpose of forming a corporation pursuant to the Florida Business Corporation Act of the State of Florida has signed these Articles of Incorporation this 27 day of March, 1998.-


LUCILA JOSEPHS, M.D.
INCORPORATOR


MARI CARMEN ORTIZ, P.A.
INCORPORATOR

MY COMMISSION EXPIRES:




NOTARY PUBLIC
STATE OF FLORIDA AT LARGE

ACCEPTANCE OF APPOINTMENT OF REGISTERED AGENT

The undersigned, having been named the Registered Agent of All Children Medical Center, Inc. hereby accepts such designation and is familiar with, and accepts, the obligations of such position, as provided in Florida Statutes Section 607.0505.-


MARI CARMEN ORTIZ
REGISTERED AGENT

DATED: March 27th, 1998.

FILED
98 APR -1 PM 12:41
SECRETARY OF STATE
TALLAHASSEE, FLORIDA