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LEONARUS CORPORATE FILING SERVICE, INC.

(Requestor's Name)

3320 S.W. 87th AVENUE

(Address)

MIAMI, FLORIDA (305)552-5973

(City, State, Zip)

(Phone #)

LOCAL REPRESENTATIVE TALLAHASSEE

OFFICE USE ONLY

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

1. CONSULTING PHYSICIANS OF MIAMI, INC.  
(Corporation Name) (Document #)

2. (Corporation Name) (Document #)

3. (Corporation Name) (Document #)

4. (Corporation Name) (Document #)

200002475072--9  
-04/01/98-01047-021  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

☒ 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

Examiner's Initials

FILED  
98 APR - 1 PM 1:54 APR - 1 AM 11:04  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
DIVISION OF CORPORATION

**ARTICLES OF INCORPORATION**  
**OF**  
**CONSULTING PHYSICIANS OF MIAMI, INC.**

**FILED**  
98 APR -1 PM 1:54  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*The undersigned incorporators desire to form a corporation pursuant to Chapter 607, Florida Statutes and hereby adopt the following articles of incorporation for such corporation.*

**ARTICLE I**

**NAME:** *The name of the corporation shall be:*

**CONSULTING PHYSICIANS OF MIAMI, INC.**

**ARTICLE II**

**PURPOSE AND POWER:** *The purpose for which the corporation is formed is to engage in any activity and business permitted under the laws of the State of Florida.*

**ARTICLE III**

**PRINCIPAL OFFICE:** *The address of the corporation's principal office shall be:*

**737 EAST 10TH STREET  
HIALEAH, FL. 33010**

**ARTICLE IV**

**INCORPORATOR(S):** *The name and address of the incorporator(s) is*

*(are):*

**MARIA C. SPINOLA  
737 EAST 10TH STREET  
HIALEAH, FL. 33010**

ARTICLE V

DIRECTORS: The number of directors constituting the corporation's initial Board of Directors is (are) **one** whose name and addresses is (are):

MARIA C. SPINOLA  
737 EAST 10TH STREET  
HIALEAH, FL. 33010

ARTICLE VI

SHARES OF STOCKS: The aggregate number of shares of stock the corporation is authorized to issue is **\*\*90\*\*** shares which shares shall be common stock having **\*\*\$1.00\*\*** par value.

ARTICLE VII

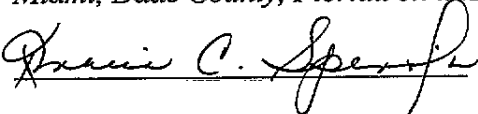
DURATION: The duration of the corporation shall be perpetual.

ARTICLE VIII

REGISTER AGENT: The name and address of the permanent registered agent is:


MARIA C. SPINOLA  
737 EAST 10TH STREET  
HIALEAH, FL. 33010

IN WITNESS THEREOF, We have executed these articles of Incorporation in Miami, Dade County, Florida on this 25th day of March, 1998.



SWORN AND SUBSCRIBED before me on this 25th day of March, 1998.



  
ANGEL D. CORDOVA  
NOTARY PUBLIC, State of Florida  
NOTARY PUBLIC STATE OF FLORIDA  
COMMISSION NO. CC479736  
MY COMMISSION EXP. AUG. 3, 1999

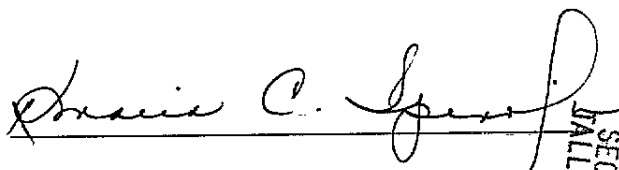
*In compliance with section 607.034 of the Florida Statutes, the following is submitted:*  
*desiring to organize or qualify under the laws of the State of Florida, with its principal*  
*place of business in the City of HIALEAH County of DADE State of Florida has name*  
*MARIA C. SPINOLA located at 737 EAST 10TH STREET, HIALEAH, FL.. as its*  
*agent to accept service of process within the State of Florida.*

**Mailing address is: 737 EAST 10TH STREET  
HIALEAH, FL. 33010**

**ACKNOWLEDGMENT**

*Having been name to accept service of process for the above mentioned corporation,  
at the place designated in this Certificate, I hereby am familiar with and accept the duties  
and responsibilities as register agent for said corporation and agree to act in this capacity,  
and further agree to comply with the provisions of all Statutes relative to the proper and  
complete performance of my duties.*

*Dated this 25th day of March, 1998*



**MARIA C. SPINOLA  
REGISTER AGENT**

**FILED**  
98 APR -1 PM 1:54  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA