## P98000049825

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

SUBJECT:	MirField / (Proposed corpo	Medical (	ensuffan.	<u>*</u> Z	
50002543045— -06/01/980113701 *****78,75 ******78  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		
٠		ADDITIONAL CO	PY REQUIRED	-7	
FROM: Stephen Miefield  Name (Printed or typed)					
300 Central Ave Suite 1100					
_<	St. Peters b		3370/	/	
-		- 3393			
	Dayame 1 ei	ephone number	CRETARY OF LAHASSEE,	PILED	

JNG-4-98

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

The second secon
ARTICLES OF INCORPORATION  The undersigned incorporator, for the purpose of forming a corporation under the Florida  Business Corporation Act, hereby adopts the following Articles of Incorporation
The undersigned incorporator, for the purpose of forming a corporation under the Florida  Business Corporation Act, hereby adopts the following Articles of Incorporation.
ARTICLE I NAME The name of the corporation shall be:
Mirfield Medical Consultants, In
ARTICLE II PRINCIPAL OFFICE  The principal place of business and mailing address of this corporation shall be:
300 Central Ave Suite 1100
ARTICLE III SHARES  The number of shares of stock that this corporation is authorized to have outstanding at any one time is:
1 million
ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS
The name and Florida street address of the initial registered agent are:
300 Central Ave suite/100, St. Petersburg
ARTICLE V INCORPORATOR FL. 5570
The name and address of the incorporator to these Articles of Incorporation are:
Stephen Mirefield.
300 Central Ave suite 1100

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

Signature/Incorporator

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 obligations of my position as registered agent

Signature/Registered Agent

Date