

P48000066/56

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LAZARUS CORPORATE FILING SERVICE, INC.

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MIAMI, FLORIDA (305) 552-5973

(City, State, Zip)

(Phone #)

LOCAL REPRESENTATIVE TALLAHASSEE

400002600914--8

-07/28/98--01081--025

\*\*\*\*\*78.75 \*\*\*\*\*78.75

OFFICE USE ONLY

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

1. QUALITY CARE 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/<br>QUALIFICATION |                     |
|--------------------------------|---------------------|
| <input type="checkbox"/>       | Foreign             |
| <input type="checkbox"/>       | Limited Partnership |
| <input type="checkbox"/>       | Reinstatement       |
| <input type="checkbox"/>       | Trademark           |
| <input type="checkbox"/>       | Other               |

RECEIVED  
98 JUL 28 PM 2:42  
DIVISION OF CORPORATION

FILED  
98 JUL 28 PM 3:04  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

Examiner's Initials

FILED  
98 JUL 28 PM 3:04  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

## ARTICLES OF INCORPORATION

WE, the undersigned, hereby associate ourselves together for the purpose of becoming a Corporation under the laws of the State of Florida providing for the formation of a Corporation for profit, with the powers, rights, privileges and immunities hereinafter mentioned, and we hereby make, subscribe and acknowledge and file with the Secretary of the State of Florida these Articles of Incorporation; and to that end we do, by these Articles, set forth:

### ARTICLE I

The name of this Corporation ( Which is hereinafter called the "Corporation" is :

Quality Care Medical Center, Inc.

### ARTICLE II

This Corporation shall exist perpetually. Corporate existence shall begin on the day upon which these Articles are approved by the Secretary of the State of Florida.

### ARTICLE III

The purpose of this Corporation is to transact any or all lawful businesses for which Corporations may be incorporated under Chapter 607 of the Florida Statutes.

### ARTICLE IV

This Corporation is authorized to issue Five Hundred (500) Shares of Common Stock, which said shares shall have a par value of Ten ( \$ 10.00 ) Dollars per share upon issuance.

### ARTICLE V

The principal place of business of this Corporation shall be at 3213 S.W. 26<sup>th</sup> Street, Miami, Florida 33133

With the privilege of having branch offices within and without the State of Florida.

### ARTICLE VI

The initial registered agent of this Corporation upon whom process may be served is  
Eduardo Puente

And the initial registered office is located at 3213 S.W. 26<sup>th</sup> Street, Miami, Florida 33133

### ARTICLE VII

This Corporation shall have two director(s) initially. The number of directors shall be fixed by the bylaws and may be changed from time to time.

#### ARTICLE VIII

The name and street addresses of the initial director(s) of this Corporation are:

( 1) Martha Vales, 3213 S.W. 26<sup>th</sup> Street, Miami, Florida 33133.

(2) Eduardo Puente, 3213 S.W. 26<sup>th</sup> Street, Miami, Florida 33133

The aforesaid director(s) shall hold office for the first year of this Corporation's existence or until a successor is chosen as provided for in the bylaws.

The initial officers of this Corporation and their addresses are:

President: Eduardo Puente, 3213 S.W. 26<sup>th</sup> Street, Miami, Florida 33133.

Vice President: Martha Vales, 3213 S.W. 26<sup>th</sup> Street, Miami, Florida 33133

Treasurer: Vivian Maury, 3213 S.W. 26<sup>th</sup> Street, Miami, Florida 33133.

Secretary: Lourdes Puente, 3213 S.W. 26<sup>th</sup> Street, Miami, Florida 33133 .

#### ARTICLE IX

The name and street address of the incorporator(s) is/are:

1) Eduardo Puente, 3213 S.W. 26<sup>th</sup> Street, Miami, Florida 33133.

The undersigned has (have) executed these Articles of Incorporation this 27 day of July 1998.

Eduardo Puente

CERTIFICATE OF DESIGNATION  
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 : Quality Care Medical Center, Inc.
2. The name and address of the registered agent and office is: Eduardo Puente, 3213 S.W. 26<sup>th</sup> Street, Miami, Florida 33133

Signature: \_\_\_\_\_

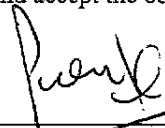


Title: Vice President

Date: 7-27-98

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.

Date: \_\_\_\_\_



\_\_\_\_\_  
Registered Agent  
Eduardo Puente

State of Florida                     )  
County of Dade                     )

The foregoing Articles of Incorporation was acknowledged before me on July 27, 1998

by Eduardo Puente known to me to be the incorporator(s) of

Quality Care Medical Center, Inc.-----

and Eduardo Puente acknowledged and agreed to the designation and duties of Registered Agent for the above mentioned Corporation that is being organized under the laws of the State of Florida .

Sheila A. Ray  
Notary Public, In and For the State of Florida, At Large

Expiration:



JOSE A. RAJOY  
COMMISSION # CC 59465-  
EXPIRES OCT 20, 2000  
BONDED THRU  
ATLANTIC BONDING CO., INC.

FILED  
98 JUL 28 PM 3:04  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA