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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

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-01/08/99-01054-012
*****78.75 *****78.75

OFFICE USE ONLY

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

1. EDILIA M. VIVANCO M.D., P.A. P.A.
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

FILED
 99 JAN - 8 PM 2:46
 SECRETARY OF STATE
 TALLAHASSEE FLORIDA

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

RECEIVED
 99 JAN - 8 AM 11:29
 DIVISION OF CORPORATION

Examiner's Initials

EDILIA M. VIVANCO M.D., P.A.

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SECRETARY OF STATE
TALLAHASSEE FLORIDA
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Article I

Name and Address

The name of this corporation is EDILIA M. VIVANCO M.D., P.A.
AND ITS ADDRESS IS 8855 Collins Ave. # 4-F, Surfside, Fl. 33154.

Article II

Duration

This corporation shall perpetual existence.

Article III

Purpose

This corporation is organized under the laws of the State of Florida, as a professional association for profit, engaged in the practice of medicine as a general practitioner in Internal Medicine.

Article IV

Capital Stock

The maximum number of shares that this corporation is authorized to have outstanding at any time is 100 shares of common stock, non par value.

Article V

Initial Registered Office and Agent

The address of the initial registered office of this corporation is 8855 Collins Ave. #4-F, Surfside, Fl. 33154 and the name of the agent is EDILIA M. VIVANCO M.D., AT this address.

Article VI

Initial Board of Directors and Incorporators.

This corporation shall have one director initially. The number of directors may increased or diminished from time to time by the by-laws but shall never be less than one. The name and address of the initial Board of Directors of this corporation who is also the incorporator signing these articles is

EDILIA M. VIVANCO M.D.
8855 Collins Ave. # 4-F
Surfside, Fl. 33154

S.S.# 265-37-7274

DLN - V152-213-57-946-0

Article VII

Indemnification


The corporation shall indemnify any officer, director to the full extent permitted by law.

Article VIII

Amendment

This corporation reserves the right to amend or repeal any provision contained in these Articles of Incorporation, or any amendment hereto and any right conferred upon the shareholders is subject to this reservation.

The undersigned subscriber have executed these Articles of Incorporation on the 4th day of January, 1999.



EDILIA M. VIVANCO M.D.
S.S.# 265-37-7274
DLN-V152-213-57-946-0

Certificate Designating Agent
F.S. §48.091

EDILIA M. VIVANCO M.D., P.A.

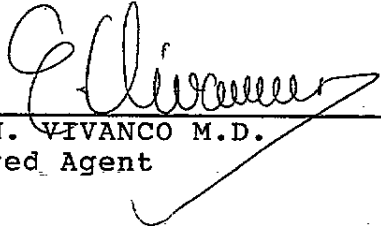
desiring to organized or qualify under the laws of the State of Florida, with its principle place of business in the Town of Surfside, State of Florida has named EDILIA M. VIVANCO M.D. LOCATED at 8855 Collins Ave. #4-F, Surfside, Fl. 33154, as its agent to accept services of process within Florida.

Acceptance

Having been named to accept services of process for

EDILIA M. VIVANCO M.D., P.A.

I hereby agree to act in this capacity and I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties.


EDILIA M. VIVANCO M.D.
Registered Agent

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