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OFFICE OSE ONLY Document #) LEZARUS CORPORATE FILING SER (Requestor's Name)			
3320 S.W. 87th AVENUE (Address) MIAMI, FLORIDA (305)552-5 (City, State, Zip) (Phone		10	000029250411 -07/07/9901047011 *****78.75 *****78.75
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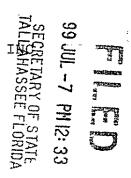
Examiner's Initials

ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be: EASTERN MEDICAL GROUP



ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

3990 W. Flagler St Suite 300 ____ Miami, Fla 33134

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: five (500) hundred shares one dollar (1) per value common stock

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Ilina Hernandez
3990 W. Flagler St Suite 300
Miami, Fla 33134

ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

Iliana Hernandez 3990 W. Flagler St Suite 300 Miami, Fla 33134

ARTICLE VI DIRECTOR(S)

The name(s) and street address(es) of the director(s) to these Articles of Incorporation is(are):

Ilina Hernandez (president &) 3990 W. Flagler St Suite 300 Secretary Miami, Fla 33134

The undersigned inc	corporato	r(s) has(have) executed th	ese Articles of	
Incorporation this _	6	day ofJuly	, 19 _99	e see jaar
		Signature		, see the see and see
		Signature	 -	
		Signature	· · · · · · · · · · · · · · · · · · ·	2.2

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of sections 607.0501 or 617.0501, 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.

he name and address (of the registered agent and office is:
Ilina Hernandez	
	(NAME)
3990 W. Flagler St	t Suite 300
(P.O.	BOX NOT ACCEPTABLE)
	•

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.

SIGNATURE

DATE 7-6-99