11 1 1 1 1 1 1		
OFFICE IS NLY (Document #) LAZA US CORPORATE FILING SET (Requestor's Name) 3320 S.W. 87th AVENUE (Address) MIAMI, FLORIDA (305)552-5 (City, State, Zip) (Phon	5973	90002933559—4 -07/16/99-01082-009 *****78.75 *****78.75
LOCAL REPRESENTATIVE TALLAHA	ASSEE OF	FICE USE ONLY
		FICE USE ONLY
CORPORATION NAME(s) & D	OCUMENT NUMBER (S	i) (if known):
MI/ Making	1 n-alter	+111
1. MY NIEDICH	L CENTER	1+11/.
(Corporation Name)	(Do	ćument #)
2.		
(Corporation Name)	(Do	cument#)
(Corporation Name)		cument#)
	OO)	
4. (Corporation Name)	lDo	cument #)
	_	\sim \sim \sim \sim \sim
Walk in Pick up time	<u> </u>	Certified Copy
		TOK MILL
Mail out Will wait	Photocopy	Certificate of Status
		1/1/2/66
NEW FILINGS	AMENDMENTS	1/19/77
Profit	Amendment	
NonProfit	Resignation of R.A., Off	icer/Director
. Limited Liability	Change of Registered A	gent
Domestication	Dissolution/Withdrawal	
Other	Merger	A SEC
	// //	
		1/1 ASS -6
OTHER FILINGS	REGISTRATION/ QUALIFICATION /	
Annual Report		We work 2355 We have a second of the
Fictitious Name	Føreign /	
Name Reservation	Limited Partnership	
Traine Heservauoti	Reinstatement	28:11#A 81 tu 00
	Trademark	
ļ	Other	
	Outor .	Examiner's Initials

ARTICLES OF INCORPORATION OF MY MEDICAL CENTRE, INC.

We, the undersigned subscribers to these Articles of Incorporation, each a natural person competent to contract, hereby associate ourselves together to form a Corporation for Profit under the provisions of Section 607 of the Florida Statutes, with all powers, rights, privileges, and immunities; and to that end we do, by these Articles, set forth:

ARTILCLE L- NAME

The name of this corporation is MY MEDICAL CENTRE, INC. (hereinafter referred to as the "Corporation") and its mailing address is 48 NW 4th Street, Homestead, FL 33030.

ARTICLE II - DURATION

This Corporation shall have perpetual existence.

ARTICLE III - PURPOSE

This Corporation may engage in any activity or business permitted under the laws of the United States and the State of Florida.

ARTICLE IV - CAPITAL STOCK

This Corporation is authorized to issue 1,000 of One Dollar (\$1.00) par value stock, which shall be designated "Common Shares."

THIS DOCUMENT PREPARED BY: JAMES & GORDON, P.A. ACCOUNTING & TAX CONSULTANTS 10749 SW 104TH STREET MIAMI, FL 33176

ARTICLE V - REGISTERED OFFICE AND AGENT

The name of the initial registered agent of this Corporation is Orby Nwadike and the address is 48 NW 4th Street Homestead, FL 33030

ARTICLE VI - INITIAL BOARD OF DIRECTORS

This Corporation shall have 2 Directors initially. The number of Directors may be increased or decreased from time to time by the Bylaws but shall never be less than one (1). The names and addresses of the initial Directors of this Corporation are:

NAME

ADDRESS

Orby Nwadike

48 NW 4th Street

Homestead, FL 33030

Ben Nwadike

48 NW 4th Street

Homestead, FL 33030

- (a) Members of the Board of Directors shall be elected and hold office in accordance with the Bylaws of this Corporation.
- (b) The business affairs of this Corporation shall be managed by the Board of Directors, and
- (c) The Board of Directors shall be shareholders in the Corporation.

ARTLICLE VII - BYLAWS

The Bylaws of this Corporation may be adopted, altered, amended, or repealed by either the shareholders or Directors.

ARTICLE VIII - INDEMNIFICATION

This Corporation shall indemnify any Officer or Director, or any former Officer or Director, to the full extent permitted by law.

ARTLICLE IX - INCORPORATIONS

The name of the person signing these Articles is Orby Nwadike.

ARTICLE X - AMENDMENT

This Corporation reserves the right to amend or repeal any provisions contained in these Articles of Incorporation, in accordance with the provisions of the Florida Business Corporation Act.

IN WITNESS WHEREOF, the	undersigned	has	executed	these	Articles	of
Incorporation this 11k day of July	, 1999.					
Machile	rporator		· -· ;		-	

MY MEDICAL CENTRE, INC.

CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN THIS STATE, NAMING REGISTERED OFFICE, AND REGISTERED AGENT UPON WHOM PROCESS MAY BE SERVED.

IN COMPLIANCE WITH FLORIDA STATUTES 607.034, THE FOLLOWING IS SUBMITTED:

That My Medical Centre, Inc. desiring to organize under the laws of the State of Florida with its principal office, as indicated in the Articles of Incorporation, in the city of Homestead, County of Dade, State of Florida, has named Orby Nwadike, whose address is 48 NW 4th Street Homestead, Florida 33030 County of Dade, State of Florida as its registered agent to accept service of process within the State of Florida.

ACCEPTANCE BY REGISTERED AGENT

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN ARTICLE V OF THESE ARTICLES OF INCORPORATION, THE UNDERSIGNED HEREBY AGREES TO ACT IN THIS CAPACITY, AND FURTHER AGREES TO COMPLY WITH THE PROVISIONS OF ALL STATUES RELATIVE TO THE PROPER AND COMPLETE DISCHARGE OF HIS DUTIES.

DATED THIS 7th DAY OF July 1999

By Wueelile

Registered Agent for

99 JUL 16 PM 1:05
SECRETARY OF STATE
TALLAHASSEE FLORIDA