

799000073281

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32302
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Tamiami Medical Group, Inc

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*****78.75 *****78.75

- ✓ Art of Inc. File _____
LTD Partnership File _____
Foreign Corp. File _____
L.C. File _____
Fictitious Name File _____
Trade/Service Mark _____
Merger File _____
Art. of Amend. File _____
RA Resignation _____
Dissolution / Withdrawal _____
Annual Report / Reinstatement _____
✓ Cert. Copy _____
Photo Copy _____
Certificate of Good Standing _____
Certificate of Status _____
Certificate of Fictitious Name _____
Corp Record Search _____
Officer Search _____
Fictitious Search _____
Fictitious Owner Search _____
Vehicle Search _____
Driving Record _____
UCC 1 or 3 File _____
UCC 11 Search _____
UCC 11 Retrieval _____
Courier _____

99 AUG 17 PM 1:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

T BROWN AUG 17 1999

Signature

Requested by:

Name

Date

Time

Walk-In

Will Pick Up

99 AUG 17 AM 9:59
RECEIVED

ARTICLES OF INCORPORATION
OF TAMIAMI MEDICAL GROUP, INC.

FILED
99 AUG 17 PM 1:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I-NAME

The name of this Corporation is: TAMIAMI MEDICAL GROUP, INC.

ARTICLE II-DURATION

The 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 of America and the State of Florida.

ARTICLE IV-CAPITAL STOCK

This Corporation is authorized to issue 1,000 shares of one dollar par value common stock.

ARTICLE V-PREEMPTIVE RIGHTS

Every shareholder upon the sale for cash of any new stock of this Corporation of the same kind class or series as that which he already holds, shall have the right to purchase his prorata share thereof, (as nearly as may be done without issuance of fractional shares) at the price at which it is offered to others.

ARTICLES VI-INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office is: 5545 S.W. 8th Street, Suite 206, Miami, Florida 33134 and the name of the initial registered agent and resident agent of this corporation is:

Heriberto Martinez
5545 S.W. 8th Street
Suite 206
Miami, Florida 33134

ARTICLE V-II PRINCIPAL OFFICE AND MAILING ADDRESS

The principal office and mailing address of this Corporation
is: 5545 S.W. 8th Street, Suite 206, Miami, Florida 33134.

ARTICLE VIII-INITIAL BOARD OF DIRECTORS

The Corporation shall have one director initially. The
number of directors may be either increased or diminished from
time to time by the By-Laws. The name and address of the initial
director of this Corporation is:

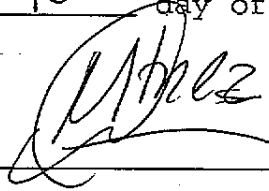
Heriberto Martinez
5545 S.W. 8th Street
Suite 206
Miami, Florida 33134

ARTICLES IX-INCORPORATOR

The name and address of the person signing the Articles as
Incorporator and Subscriber is:

Heriberto Martinez
5545 S.W. 8th Street
Suite 206
Miami, Florida 33134

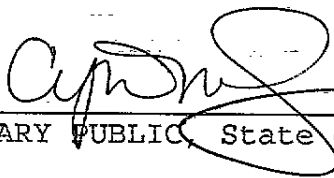
IN WITNESS WHEREOF, the undersigned subscribe has executed these Articles of Incorporation on this 12th day of August, 1999.



STATE OF FLORIDA)
COUNTY OF DADE)

BEFORE ME, a Notary Public authorized to take acknowledgments in the State and County set forth above, personally appeared Heriberto Martinez, who produced _____ as identification or who is personally known to me and known to me to the person who executed the foregoing Simultaneous Acceptance of Appointment as Registered Agent of TAMIAMI MEDICAL GROUP, INC.

IN WITNESS WHEREOF, I have hereto set my hand and affixed my official seal in the State and County aforesaid on this 12th day of August, 1999.



NOTARY PUBLIC, State of Florida at Large

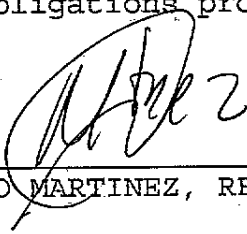
My Commission Expires:



CYNTHIA M. SANCHEZ
COMMISSION # CC623847
EXPIRES FEB 23, 2001
BONDED THROUGH
ATLANTIC BONDING CO., INC.

SIMULTANEOUS ACCEPTANCE OF APPOINTMENT AS REGISTERED AGENT OF
TAMIAMI MEDICAL GROUP, INC.

The undersigned, Heriberto Martinez, pursuant to Florida Statutes Section 607.034 (3) hereby accepts the appointment as registered agent of TAMIAMI MEDICAL GROUP, INC. and states that he is familiar with and accepts obligations provided for in Florida Statutes Section 607.325.



HERIBERTO MARTINEZ, REGISTERED AGENT

STATE OF FLORIDA)

COUNTY OF DADE)

BEFORE ME, a Notary Public authorized to take acknowledgments in the State and County set forth above, personally appeared Heriberto Martinez, who produced _____ as identification or who is personally known to me and known to me to the person who executed the foregoing Simultaneous Acceptance of Appointment as Registered Agent of TAMIAMI MEDICAL GROUP, INC.

IN WITNESS WHEREOF, I have hereto set my hand and affixed my official seal in the State and County aforesaid on this 12th day of August, 1999.


NOTARY PUBLIC, State of Florida at Large

My Commission Expires:



CYNTHIA M. SANCHEZ
COMMISSION # CC623847
EXPIRES FEB 23, 2001
BONDED THROUGH
ATLANTIC BONDING CO., INC.

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