



6455754



**STATE OF CALIFORNIA**  
*Office of the Secretary of State*  
**ARTICLES OF INCORPORATION**  
**CA PROFESSIONAL CORPORATION**

California Secretary of State  
1500 11th Street  
Sacramento, California 95814  
(916) 657-5448

For Office Use Only

**-FILED-**

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|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Corporation Name                                                                                                                                                                                            | LAM MEDICAL SERVICES, P.C.                                                                                                                                                                                                                                                                                                                                                           |
| Initial Street Address of Principal Office of Corporation<br>Principal Address                                                                                                                              | 5327 DONALD RIDGE COURT<br>FAIRFIELD,, CA 94534                                                                                                                                                                                                                                                                                                                                      |
| Initial Mailing Address of Corporation<br>Mailing Address                                                                                                                                                   | 5327 DONALD RIDGE COURT<br>FAIRFIELD,, CA 94534                                                                                                                                                                                                                                                                                                                                      |
| Attention                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                      |
| Agent for Service of Process<br>Agent Name                                                                                                                                                                  | KIMHAI LAM                                                                                                                                                                                                                                                                                                                                                                           |
| Agent Address                                                                                                                                                                                               | 5327 DONALD RIDGE COURT<br>FAIRFIELD,, CA 94534                                                                                                                                                                                                                                                                                                                                      |
| Shares                                                                                                                                                                                                      | The total number of shares the corporation is authorized to issue is: 1,000<br>Does the corporation have more than one class or series of shares? No                                                                                                                                                                                                                                 |
| Purpose Statement                                                                                                                                                                                           | The purpose of the corporation is to engage in the profession of MEDICINE and any other lawful activities (other than the banking or trust company business) not prohibited to a corporation engaging in such profession by applicable laws and regulations. This corporation is a professional corporation within the meaning of California Corporations Code section 13400 et seq. |
| Additional information and signatures set forth on attached pages, if any, are incorporated herein by reference and made part of this filing.                                                               |                                                                                                                                                                                                                                                                                                                                                                                      |
| Electronic Signature                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                      |
| <input checked="" type="checkbox"/> By checking this box, I acknowledge that I am electronically signing this document as the incorporator of the Corporation and that all information is true and correct. |                                                                                                                                                                                                                                                                                                                                                                                      |
| <u>KIMHAI LAM</u><br>Incorporator Signature                                                                                                                                                                 | <u>11/09/2024</u><br>Date                                                                                                                                                                                                                                                                                                                                                            |