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LAZARUS CORPORATE FILING SERVICE

(Requestor's Name)

3320 S.W. 87 AVENUE

(Address)

MIAMI, FLORIDA (305)552-5973

(City, State, Zip) (Phone #)

TERESA ROMAN (TALLAHASSEE REPRESENTATIVE)

600004524256-1
-08/08/01-01022-022
*****78.75 *****78.25

OFFICE USE ONLY

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

1. M & N MEDICAL CENTER INC. (Corporation Name) (Document #)

2. (Corporation Name) (Document #)

3. (Corporation Name) (Document #)

4. (Corporation Name) (Document #)

- Walk in (checked) Pick up time 2.0 (checked) Certified Copy (checked)
Mail out (unchecked) Will wait (unchecked) Photocopy (unchecked) Certificate of Status (unchecked)

FILED 01 AUG -8 PM 1:59 SECRETARY OF STATE TALLAHASSEE FLORIDA

RECEIVED 01 AUG -8 AM 10:13 DIVISION OF CORPORATION

Table with 2 columns: Filing Type, Description. Includes Profit, NonProfit, Limited Liability, Domestication, Other.

Table with 2 columns: Amendment Type, Description. Includes Amendment, Resignation of R.A., Officer/Director, Change of Registered Agent, Dissolution/Withdrawal, Merger.

Table with 2 columns: Other Filings, Description. Includes Annual Report, Fictitious Name, Name Reservation.

Table with 2 columns: Registration/Qualification, Description. Includes Foreign, Limited Partnership, Reinstatement, Trademark, Other.

Examiner's Initials

Handwritten signature and date 8/8/01

ARTICLES OF INCORPORATION

The undersigned incorporate(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:

M & N MEDICAL CENTER INC.

ARTICLE II

PRINCIPAL OFFICE

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

**1800 SW 27 AVENUE
MIAMI, FLORIDA 33145**

ARTICLE III

SHARES

The number of shares, which the corporation is authorized to issue and have outstanding at any time, is 1000 shares of common stock, and which common stock shall have a par of \$1.00 (one dollar) per share. All stock is to be issued fully paid and exempt from assessment.

ARTICLE IV

INITIAL REGISTERED AGENT AND STREET ADDRESS

In pursuance of Chapter 607.34 Florida Statutes, the following is submitted, in compliance with said:

First That **M & N MEDICAL CENTER INC.** Desiring to organize under the laws of the State Florida with its principal office as indicated in the articles of incorporation at City of MIAMI County of MIAMI-DADE State of Florida had name **ANGEL MONTERO** of, 1531 NW 34 AVENUE, MIAMI FL 33125 of its agent to accept service of process within this state. Having been named to accept service of process for the above state corporation, at place designated in this certificate. I hereby accept to act in this capacity, and agree to comply with the provisions of said Act relative to keeping open said office.

By: 
ANGEL MONTERO
Registered Agent

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TALLAHASSEE FLORIDA

