Division of Corporations Public Access System

# Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H03000330664 3)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)205-0381

From:

Account Name

: EMPIRE CORPORATE KIT COMPANY

Account Number: 072450003255.

Phone

: (305)634-3694

Fax Number

: (305)633-9696°

# FLORIDA PROFIT CORPORATION OR P.A.

urena chiropractic center, inc.

Certificate of Status		0
Certified Copy		1
Page Count		07
Estimated Charge	:	\$78.75

Plantropic Filipa Menu.

Corporate Filing

Public Access Help



# H030003301104

# CERTIFICATE OF INCORPORATION

### ARTICLES OF INCORPORATION FOR

## UREÑA CHIROPRACTIC CENTER, INC.

We the undersigned incorporator(s), for the purpose of forming a corporation under the Florida General Corporation privileges, and immunities of a corporation for profit, bereby adopt(s) the following Articles of Incorporation.

#### ARTICLE I

The name of the corporation shall be:

UREÑA CHIROPRACTIC CENTER, INC.

#### ARTICLE II

The corporation may engage in any activity of business permitted under the laws of the United States of Florida.

#### ARTICLE III

The corporation is authorized to issue one hundred (100) shares of \$10.00 par value Common Stock, which shall be designated "Common Shares". Shares of Common Stock by both the president and vice-president. Stocks will have no value if not signed by the president and vice-president.

#### ARTICLE IV

The amount of capital with which this corporation will begin business shall not be less than one Thousand (\$1000.00) dollars,

Prepared by: Gioranni Castellanos Vares Inc. 1688 Coral Way Miami Fl. 33145 Tel: 305-285-8868 Fax: 305-285-6886

10700330004

DEC-02-5052 16:56

#### ARTICLE V

This corporation is to have perpetual existence.

#### ARTICLE VI

The principal office of this corporation shall be:

717 Ponce De Leon Blud. Suite 237 Coral Gables, FL. 33134

#### ARTICLE VII

The number of the Board of Directors of the Corporation shall not be less than one person. The names and post office addresses of the First Board of Directors, who subject to the provisions of the Certificate of Incorporation, the By-laws and the Acts of Legislature, shall hold office for the Corporation, are:

RAFAEL ENRIQUE UREÑA 717 Ponce De Leon Blad. Suite 237 Coral Gables, FL. 33B4 PRESIDENT, VICE-PRESIDENT, SECRETARY

The Board of Directors will be able to utilize all powers granted them by law in order to direct the Corporation as they see fit.

DEC-62-5003 10:20

#### ARTICLE VIII

The names and post office addresses of each shareholder to the Certificate of Incorporation slash incoporator are as follows:

SLASH-INCORPORATE SHAREHOLDERS

% OF SHARES

RAFAEL ENRIQUE UREÑA 717 Ponce De Leon Blad. SUITE 237 MIAMI, FL. 33134

100%

#### ARTICLE IX

The corporation shall have the right and power to, from time to time, determine whether and to what extent, at what time and places and under what conditions and regulations the accounting books of this Corporation, other than the stock book, or any of them, shall be open to The inspection of the stockholders, and no stockholders shall have any right of inspections of any account book or document of this Corporation, except as conferred by statute, unless authorized by resolution of the stockholders or Board of Directors. The Corporation, in it's By-laws confers power upon it's Board of Directors or Officers, in addition to the foregoing and in addition to the powers authorized and expressly conferred by Statute.

The corporation reserves the rights to amend, alter, change or repeal any provisions contained in this Certificate of Incorporation in the manner now bereafter prescribed by statute, and all rights conferred upon the stockholders herein or granted subject to this reservation.

STATE OF FLORIDA }

COUNTY OF MIAMI-DADE }

Before me, the undersigned authority, duly authorized to administer ouths and receive acknowledgments, personally appeared

## RAFAEL ENRIQUE UREÑA

Who, after being duly sworn by me, depose and say that he signed the above and foregoing Certificate of Incorporation for the purposes therein set forth.

WITNESS my band and official seal, at Miami, Dade County, Florida, this 5th day of December of the year 2003.

FAUSTINO J. RODRIGUEZ

Notary Public,

State of Florida at Large

PAUSTINO L RODRIGUEZ
Neisry Public - State of Plortee
My Constr. Expires May 20, 2005
Commission # 00002266

We, the undersigned, being each and all of the original subscribers to the capital stock berein above named for the purpose of forming a corporation for profit to do business

Both within and without the State of Florida, do bereby declaring and certifying that the facts herein stated are true, and so respectively agree to abide by the Articles as berein stated.

Subscribed at Miami, Dade County, Florida, this 23rd day of September of the year 2003

RAFAEL ENRIQUE URENA

PRESIDENT, VICE-PRESIDENT, SECRETARY

H0300330064

#### CERTIFICATE OF ACKNOWLEDGMENT OF REGISTERED AGENT FOR SERVICE AND PROCESS WITHIN THE STATE OF FLORIDA

Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted:

That: UREÑA CHIROPRACTIC CENTER, INC.

Is qualified to do business under the laws of the State of Florida, with its REGISTERED OFFICE at:

717 Ponce De Leon Blvd. Suite 237 Coral Gables, FL. 33134

And has appointed: RAFAEL ENRIQUE UREÑA

As it's agent to accept services of process within the State.

ACKNOWLEDGMENT

Having been named as Registered Agent to accept service of process for the above stated Corporation at the place designated in the Certificate. I hereby accept to act in this capacity and agree to comply with the provisions of said Act relative to keeping office said office.

RAFAEL ENRIQUE UREÑA, Registered Agent

10300033010C04

DEC-62-5863 16:57