

P04000015484

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

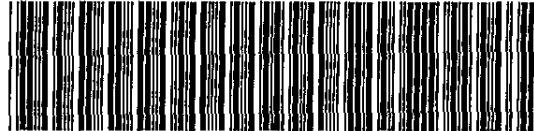
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900026998679

01/22/04--01035--1906 **7117

DIVISION OF CORPORATION

04 JAN 22 PM 11:23

TALLAHASSEE, FLORIDA

04 JAN 22 PM 7:19

js

OFFICE USE ONLY(DOCUMENT #)

LAZARUS CORPORATE FILING SERVICE

3320 S.W. 87 AVENUE

MIAMI, FLORIDA (305)552-5973

OFFICE USE ONLY

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

1. MEDIBEST TELEGROUP INSURANCE CORP
(Corporation Name) (Document #)

2. _____
(Corporation Name) (Document #)

3. _____
(Corporation Name) (Document #)

4. _____
(Corporation Name) (Document #)

☒ Walk in ☒ Pick up time 2:00

☒ Certified Copy

☐ Mail out ☐ Will wait

☐ Photocopy

☐ Certificate of Status

NEW FILINGS	
☒	Profit
☐	NonProfit
☐	Limited Liability
☐	Domestication
☐	Other

AMENDMENTS	
☐	Amendment
☐	Resignation of R.A., Officer/Director
☐	Change of Registered Agent
☐	Dissolution/Withdrawal
☐	Merger

OTHER FILINGS	
☐	Annual Report
☐	Fictitious Name
☐	Name Reservation

REGISTRATION/ QUALIFICATION	
☐	Foreign
☐	Limited Partnership
☐	Reinstatement
☐	Trademark
☐	Other

FILED
JUN 22 AM 7:10
TALLAHASSEE, FLORIDA

Examiner's Initials

ARTICLES OF INCORPORATION

The undersigned Incorporator(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:

Medibest Telegroup insurance corp

RECORDED
TALLAHASSEE, FLORIDA

OCT 22 AM 7:10

ARTICLE II - PRINCIPAL OFFICE

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

6691 Cowpen Rd apt #A111
Miami Lakes FL 33014

ARTICLE III - SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

100

ARTICLE IV - INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Hector M Echezabal
6691 Cowpen Rd apt #A111
Miami Lakes FL 33014

ARTICLE V - INCORPORATOR

The name and street address of the incorporator to these Articles of Incorporation is:

Hector M Echezabal
6691 Cowpen Rd APT #A111
Miami Lakes FL 33014

The undersigned incorporator has executed these Articles of Incorporation this 21 day of January 2024



Signature

ARTICLE VI- DIRECTOR(S)

The name(s) and street address(es) of the director(s) to these Articles of Incorporation is (are):

Hector M Echezabal (President)
Natali Navarro
6691 Cowpen Rd APT #A111
Miami Lakes FL 33014.

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT /REGISTERED OFFICE

Having been named as Registered Agent and to accept service of process for the above stated corporation at place designated in this certificate, I hereby accept the appointment as Registered Agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes related to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as Registered Agent.



Registered Agent Signature

CLERK OF COURT
TALLAHASSEE, FLORIDA

01/19/22 01:17:17