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To:

Division of Corporations

Fax Number : (850)205-0381

From:

Account Name : FAS-T CORP. AGENTS, INC.

Account Number: 071001002335 Phone: (305)599-0839 Fax Number: (305)716-0346

# FLORIDA PROFIT CORPORATION OR P.A.

# SOUTH BROWARD WOMEN'S CARE, INC.

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

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### ARTICLES OF INCORPORATION

### South Broward Women's Care, Inc.

The undersigned subscriber to these Articles of Incorporation a Proposition of the contract, hereby subscribes and forms a corporation for profit under the Laws of Florida.

#### ARTICLE I - NAME

The name of this corporation is:

South Broward Women's Care, Inc.

#### ARTICLE II - NATURE OF HUSINESS

This corporation may engage in any activity or business permitted under the laws of the United States and of this State.

### ARTICLE III - CAPITAL STOCK

The maximum number of shares of stock that this corporation is authorized to have cutstanding at any one time is One Million (1,000,000) shares of Common Stock. The par value of each share of stock is \$1.00.

### ARTICLE IV - INITIAL CAPITAL

The amount of the capital with which this corporation shall begin business is One Thousand Dollars (\$1,000.00).

#### ARTICLE V - CORPORATE EXISTENCE

This corporation shall have perpetual existence.

### ARTICLE VI - ADDRESS

The initial street address of the principal office of this corporation in the State of Florida is 599 S. Federal Highway. Dania, Florida 33004.

## APPICLE VII - MANAGEMENT

The business of the corporation shall be managed by the stockholders of the corporation rather than by a Board of Directors.

## ARTICLE VILL - SUBSCRIPER

The name and address of the initial subscriber to these Articles of Incorporation and the number of shares outstanding ere:

Name and Address Elis Dumany P.O. Box 840495 Miami, Florida 33164

<u> Shares</u> 2,000

The name and address of the officers of this comporation are as

follows:

Mann and Address Elie Dumeny P.O. Box 640495 Miami, Florida 32164 Office President, Secretary Vice President, Treasurer

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IN WITHESS WHEREOF, We, the subscribers, have executed these Arcicles of Incorporation this day of January, 2004.

STATE OF FLORIDA COUNTY OF BROWARD

Dumeny who is/see personally known to me or has produced as identification, to be the individual described in and whom executed the foregoing Articles of Incorporation, and have acknowledged before me that he executed the same for the purposes therein expressed.

IN WITNESS MERROY, I have hereunto affired my hand and official seal this 24 day of January, 2006.

MOTARY PUBLIC

My commission expires:

FRINTED NAME OF NOTARY PUBLIC

Freeldent

Ira L. Kahn
Commission #D0238957
Expires: Sep 17, 2807
Bonded Thru
Admitic Bonding Co., Inc.

CRETIFICATE DEGIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN FLORIDA, NAMING AGENT UPON WHOM PROCESS MAY BE SERVED

IN COMPLIANCE WITH SECTION 48.031, PLORIDA STATUES, THE FOLLOWING IS SUBMITTED:

PIRST--TRAT South Broward Women's Care. Inc., desiring to organish or qualify under the laws of the State of Florida with its principal place of business at city of See Rench Lakes, state of Florida, has named flie Dumeny, logated at 599 S. Federal Highway, Dania, Florida 33004, as its resident agent to accept service of process within Florida.

SIGNATURE SLIP CORPORATE OFFICER)

TITLE PRESIDENT

DATE 1-29-04

EAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED ORGANIZATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBI AURER TO ACT IN THIS CAPACITY, AND I SUFTHER AGREE TO COMPLIENT WITH THE PROVISIONS OF ALL STATUSS RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUFFIES.

BIGNATURE

Demeny, REGISTERED AGENT

A. Federal Highway

1-29.04

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