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To:

Division of Corporations

Fax Number : (850)205-0381

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Account Name : RODRIGUEZ & URIARTE TAX SERVICES

Account Number : I20010000011 : (305)557-0962 Phone Fax Number : (305)557-0692

FLORIDA PROFIT CORPORATION OR P.A.

Prostocare of South Florida, Inc.

Certificate of Status	1
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1/25/05

ARTICLES OF INCORPORATION OF PROSTOCARE OF SOUTH FLORIDA, INC.



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SECRETARY OF STATE TALLAHASSEE, FLORIDA

ONE: The name of the corporation is

Prostocare of South Florida, Inc.

TWO: The duration of the corporation shall be perpetual.

THREE: The principal address and registered office of this corporation is P.O. Box 565932
Pinecrest, FL 33256

FOUR: The general purpose or purposes for which this corporation is being formed are to include the transactions of any, or all, lawful business permitted under the laws of the State of Florida.

FIVE: The aggregate number of shares, which the corporation shall have authority to issue, is one thousand (1,000) common shares with a value of one 00/100 dollar (\$1.00) each.

SIX: The registered agent and the street address of the initial registered office of the corporation in the State of Florida is:

Name:

Address:

RAUL A. SANCHEZ

9301 S.W. 92nd Avenue, #A109 Miami, FL 33176

SEVEN: The number of directors constituting the initial board of directors is one and the name and address of the person who is to serve as member thereof is as follows:

Name:

Address:

RAUL A. SANCHEZ

9301 S.W. 92nd Avenue, #A109 Miami, FL 33176

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EIGHT: The name and address of the sole incorporator is:

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Name:

Address:

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RAUL A. SANCHEZ

9301 S.W. 92" SEORTIE: #4 109 STATE Miami, FL 35156 AHASSEE, FLORIDA

IN WITNESS WHEREOF, the undersigned, as sole incorporator of this Aorporation has executed these Articles of Incorporation.

DATED: 1-24-05

RAUL A. SANCHEZ

STATE OF FLORIDA COUNTY OF MIAMI-DADE

I HEREBY CERTIFY that on this day, before me, a Notary Public authorized in the State and County named above to take acknowledgments, personally appeared Raul A. Sanchez, who produced FL.DR.LIC.#S522-721-57-007-0, as identification, and who is known to be the person described as the subscriber in and who executed the foregoing Articles of Incorporation, and acknowledged before me that he subscribed to those Articles of Incorporation.

WITNESS my hand and official seal in the County and State named above this 24th day of January, 2005.

NOTARY PUBLIC

L. UFIZAPTE
MY COMMISSION # DD 003882
EXPIRES: April 13, 2005
Bonded Thru Notary Public Undersuffers

I, the undersigned, hereby accept the appointment as Registered Agent of the above noted corporation. I am familiar with, and accept the obligations of, Section 607.325 of the Florida Statutes.

RAUL A. SANGHEZ

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