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Florida Department of State
Division of Corporations
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To:
Division of Corporations
Fax Number : (850)617-6381

K. PAGE

From:
Account Name : LAZARUS CORPORATE FILING SERVICE, INC.
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MAY 20 2020

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

**FLORIDA PROFIT/NON PROFIT CORPORATION
APACE HEALTH CORP.**

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

2020 MAY 19 PM 4:12

Second Request

SECRETARY OF STATE
TALLAHASSEE, FL

2020 MAY 19 PM 12:04

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ARTICLES OF INCORPORATION
In compliance with Chapter 607 (Profit)

ARTICLE I NAME: The name of the corporation is:

Apac Health Corp.

ARTICLE II PRINCIPAL OFFICE:

The principal street address and mailing address is:

Lesther Campos Velazquez
664 NW 123 RD Path, miami FL 33182

ARTICLE III SHARES: The number of shares of stock is: 100

ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:

Lesther Campos Velazquez (P)

ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:

The name and Florida street address (PO Box not acceptable) of the registered agent is:

Lesther Campos Velazquez
664 NW 123 RD Path, miami FL 33182

ARTICLE VI INCORPORATOR: The name and address of the incorporator is:

Lesther Campos Velazquez
664 NW 123 RD Path miami FL 33182

SECRETARY OF STATE
STATE OF FLORIDA

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Required Signatures:

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity


Registered Agent

5-15-20
Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.


Incorporator

5-15-20
Date

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TALLAHASSEE, FL