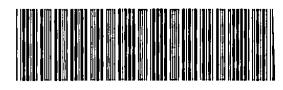
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(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
, , , , ,					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					

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### **COVER LETTER**

TO: Registration Sect Division of Corpe					
MIGUEL C	ONETO, MD Inc				
SUBJECT:	Name of corporat	ion - n	oust include suffix		
Dear Sir or Madam:					
"Certificate of Existence.	on by Foreign Corporation for "Certificate of Good S corporation to transact bus	Standin	g'' and check are subt	t Business in Florida," nitted to register the	
Please return all correspo MARCELA CURA ONET	ndence concerning this ma	tter to	the following:		
	Name	of Per	son		
MIGUEL ONETO, MD. P.	\				
	Firm/C	ompar	ny		
3824 CEDAR SPRINGS R	D#801-2245				
	Ac	idress			
DALLAS, TX 75219					
	City/Stat	e and	Zip code		
marcelacuraoneto@hotmai			<u> </u>		
	E-mail address: (to be use	ed for	tuture annual report n	ouncation)	
For further information of	oncerning this matter, plea	se call			
Marcela Cura Oncto	956 at (	5	622-4470		
Name of Person		Code	Daytime Telephone Number		
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301			MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		
Enclosed is a check for t	he following amount:				
□ \$70.00 Filing Fee	■ \$78.75 Filing Fee & Certificate of Status		78.75 Filing Fee & Certified Copy	S87.50 Filing Fee, Certificate of State Certified Copy	

## APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSABUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

MIGUEL ONE  (Enter name of c  "Inc.," "Co.," "C	orporation; must include "INCORPORATED," "Corp." "Inc," "Co," or "Corp.")	COMPANY," "CORPORATION	,
(If name unavail	able in Florida, enter alternate corporate name ado	pted for the purpose of transacting	business in Florid
TEXAS 3.		-0615674	
12/05/2003		(FEI number, if applicable)	
4(Date	e of incorporation)	(Date of duration, if other than perpetual)	
6	(Date first transacted business in FI (SEE SECTIONS 607.1501 & 607.1502	lorida, if prior to registration) , F.S., to determine penalty liabili	iy)
_	PRINGS RD #801-2245, DALLAS, TX 75219		
7(Principal office address) 3824 CEDAR SPRINGS RD #801-2245, DALLAS, TX 75219			19 0
	(Current mailing)	nddress, if different)	P 27
8. Name and stre	et address of Florida registered agent: (P.O.	Box <u>NOT</u> acceptable)	·
Name:	JULIETA ONETO		<b>H</b> ;
Office Address:	17371 BALARIA ST	_	
	BOCA RATON	Florida	
	(City)	(Zip code)	

9. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the designated in this application, I hereby accept the appointment as registered agent and agree to act in this cap further agree to comply with the provisions of all statutes relative to the proper and complete performance of a duties, and I am familiar with and accept the obligations of my position as registered agent.

(Registered agent's signature)

10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this applic the Department of State, by the Secretary of State or other official having custody of corporate records in the juri under the law of which it is incorporated.

A. DIRECTORS MIGUEL ONETO Chairman: 3824 CEDAR SPRINGS RD #801-2245 Address: DALLAS, TX 75219 JULIETA ONETO Vice Chairman: 17371 BALARIA ST Address: BOCA RATON, FL 33496 **B. OFFICERS** MIGUEL ONETO President: 3824 CEDAR SPRINGS RD #801-2245 Address: DALLAS, TX 75219 JULIETA ONETO Vice President: 17371 BALARIA ST Address: DALLAS, TX 75219 Address: \_\_\_\_\_\_\_ Address: \_\_\_\_\_\_ NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. Signature of Director or Officer The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated are true and that he or she is aware that false information submitted in a document to the Department of State con a third degree felony as provided for in s.817.155, F.S. MGUEL ONETO, PRESIDENT (Typed or printed name and capacity of person signing application)

11. Names and business addresses of officers and/or directors:



## Office of the Secretary of State

#### **Certificate of Fact**

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Articles c Association for Miguel Oneto, M.D., P.A. (file number 800276871), a Professional Association, v filed in this office on December 05, 2003.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my nam officially and caused to be impressed hereon the Seal-State at my office in Austin, Texas on September 23, 2019.



Ruth R. Hughs

Ruth R. Hughs Secretary of State