

No3000010830

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

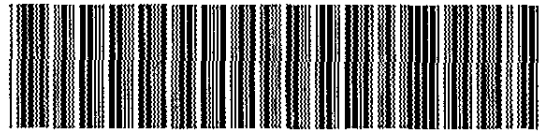
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100025290701

12/16/03 -01003--007 **78.75

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
03 DEC 16 PM 12:34

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

RECEIVED
03 DEC 16 AM 11:54

12/17 ✓

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. AMERICAN ACADEMY OF CULTURAL
(Corporation Name) (Document #)
2. COMPETENCY IN MEDICINE, INC.
(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	
<input checked="" type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

Examiner's Initials

CERTIFICATE OF INCORPORATION
OF

American Academy of Cultural Competency in Medicine
Inc.

In Compliance with Chapter 617, F.S., (Not for Profit)

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
03 DEC 16 PM 3:34

ARTICLE I NAME

The name of the corporation shall be: American Academy of Cultural Competency in Medicine, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of the corporation is: 10395 NW 46th St, Miami, FL 33178-2238.

ARTICLE III PURPOSE

The specific purposes for which the corporation is organized are as follows:

- To improve the cultural competency of all healthcare workers
- To improve the medical treatment of all patients
- To promote better understanding within the American healthcare system of the cultural aspects of disease
- To reduce the incidence of preventable disease and promote healthy lifestyles

ARTICLE IV MANNER OF ELECTION

The manner of Appointment and Election of Officers and Directors. The initial Officers and Directors of the American Academy of Cultural Competency in Medicine, Inc. are appointed for a term of three years. Subsequently, Officers and Directors will be elected by a vote by members in good standing for a term of three years.

ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS

The names and addresses of the initial officers of the corporation are:

Rene F. Rodriguez, M.D., F.A.C.S., 10395 NW 46th St, Miami, FL 33178-2238 -
President

Marietta Stanton, Ph.D., M.B.A., M.A., M.S., B.S.N., 3732 Sierra Drive
Tuscaloosa, AL 35406 - Secretary

James P. Tierney, M.A., M.B.A., 12624 Lake Normandy Lane, Fairfax, VA
22030 - Treasurer

The names of officers/directors who may apply for a license, open a bank account, etc.

Rene F. Rodriguez, M.D., F.A.C.S.
James P. Tierney, M.A., M.B.A.

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial Registered Agent is: Rene F. Rodriguez, M.D., 10395 NW 46th St, Miami, FL 33178-2238

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is: Rene F. Rodriguez, M.D., 10395 NW 46th St, Miami, FL 33178-2238

The effective date of the Articles of Incorporation is the date of filing with the State of Florida.

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.



Signature/Registered Agent
Rene F. Rodriguez

6 Dec 2003

Date



Signature/Incorporator

Rene F. Rodriguez

6 Dec 2003

Date

Before Me
Rene Santos
12-06-2003



Rogelia Santos
My Commission DD236579
Expires November 16, 2007

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
03 DEC 16 PM 12:34