

P00000001452

TRANSMITTAL LETTER

Department of State  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

300003083743--6  
-12/29/99--01095--021  
\*\*\*\*\*48.75 \*\*\*\*\*48.75

SUBJECT: CORTES HEALTH SERVICES INC.

(Proposed corporate name - must include suffix)

300003083743--6  
-12/29/99--01095--022  
\*\*\*\*\*30.00 \*\*\*\*\*30.00

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

☐ \$70.00  
Filing Fee

☐ \$78.75  
Filing Fee  
& Certificate of Status

☒ \$78.75  
Filing Fee  
& Certified Copy

☐ \$87.50  
Filing Fee,  
Certified Copy  
& Certificate of  
Status

ADDITIONAL COPY REQUIRED

FROM: ISIDRA RIVERA CORTES

Name (Printed or typed)

7611 S. ORANGE BLOSSOM TRAIL #265

Address

ORLANDO FL 32809

City, State & Zip

407 - 6946604

Daytime Telephone number

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

99 DEC 29 AM 8:17

FILED

NOTE: Please provide the original and one copy of the articles.

8/1/6

## ARTICLES OF INCORPORATION

*The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.*

### **ARTICLE I NAME**

The name of the corporation shall be:

CORTES HEALTH SERVICES INC.

### **ARTICLE II PRINCIPAL OFFICE**

The principal place of business and mailing address of this corporation shall be:

7611 S. ORANGE BLOSSOM TRAIL  
SUITE #265  
ORLANDO FL 32809

### **ARTICLE III SHARES**

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

ONE THOUSAND (100)

### **ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS**

The name and Florida street address of the initial registered agent are:

ISIDRA RIVERA-CORTES  
7611 S. ORANGE BLOSSOM TRAIL  
ORLANDO FL 32809

### **ARTICLE V INCORPORATOR**

The name and address of the incorporator to these Articles of Incorporation are:

ISIDRA RIVERA CORTES  
7611 S. ORANGE BLOSSOM TRL  
ORLANDO FL 32809

Isidra Cortes

Signature/Incorporator

12 - 27 - 99

Date

(An additional article must be added if an effective date is requested.)

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

Isidra Cortes

Signature/Registered Agent

12 - 27 - 99

Date

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99 DEC 29 AM 8:17  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA