POODOOTSOZO TRANSMITTAL LETTER

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

SUBJECT:	MEDICAL INSTITUT	TE OF MAMT		-
			000003 -08/11 *****	/UUU1043014
inclosed is an origi	inal and one(1) copy of the articles	of incorporation and a	check for :	
☐ \$70.00 Filing Fee	Filing Fee & Certificate	□\$122.50 Filing Fee & Certified Copy	☐ \$131.25 Filing Fee, Certified Copy & Certificate	
ADDITIONAL C			PY REQUIRED	_
FR	OM: PELEZ, BEHAK Name (Prin	E. ASSOCIATES ted or typed)	· PA·	4
130735 NW 1ST AVE.			_	OO AUG
	MIAME, PL City, St.	33168 ate & Zip		
	(305) 608-96	phone number		ED PM 2: 09

ARTICLES OF INCORPORATION OF MEDICAL INSTITUTE OF MIAMI, INC.

We, the undersigned, all of whom are of legal age, do hereby associate ourselves for the purpose of becoming a corporation under the laws of the State of Florida authorizing the formation of corporations.

ARTICLE I

The name of this corporation shall be:

MEDICAL INSTITUTE OF MIAMI, INC.

ARTICLE II

The purpose is to engage in any activities or business permitted under the laws of the United States and the State of Florida.

ARTICLE III

It shall have the authority to issue 100 shares of stock, all of one class, with \$ 1.00 par value.

ARTICLE IV

The corporation shall begin with \$ 100.00 capital.

ARTICLE V

The period of its duration is perpetual.

ARTICLE VI

The address of its principal office is:
47 NW 76th Court
Miami, FL. 33126

Prepared by: Perez, Behar & Associates, PA. 13935 NW 1st Avenue Miami, FL. 33168 (305) 688-9694 DALLAMASSEE, I LORIDA

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ARTICLE VII

The number of directors constituting its initial Board of Directors is (1) whose name(s) and address(es) is (are):

Lilia R Fernandez 47 NW 76th Court Miami, FL. 33126 President

ARTICLE VIII

The name and address of the subscriber is:

Lilia R Fernandez 47 NW 76th Court Miami, FL. 33126

ARTICLE IX

The registered agent and registered office for the corporation shall be:

PEREZ, BEHAR & ASSOCIATES, PA. 13935 NW 1st AVENUE MIAMI, FL. 33168

ARTICLE X

Shareholders shall be entitled to preemptive rights.

Lilia R Fernandez

CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN FLORIDA, NAMING AGENT UPON WHOM PROCESS MAY BE SERVED.

IN COMPLIANCE WITH SECTION 48.091, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED:

FIRST THAT MEDICAL INSTITUTE OF MIAMI, INC. DESIRING TO ORGANIZE OR QUALIFY UNDER THE LAWS OF THE STATE OF FLORIDA, WITH ITS PRINCIPAL PLACE OF BUSINESS AT CITY OF MIAMI, STATE OF FLORIDA HAS NAMED PEREZ, BEHAR & ASSOCIATES, PA. AS ITS AGENT TO ACCEPT SERVICE OF PROCESS WITHIN FLORIDA.

Signature:

Title: PRESIDENT

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES.

Signature:

RAMON PEREZI VICE, PRESIDENT PEREZ, BEHAR & ASSOCIATES, PA.

Date: 8 4 00

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