

# PD1000015196

## TRANSMITTAL LETTER

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

800003662238--1  
-02/08/01--01102--010  
\*\*\*\*\*87.50 \*\*\*\*\*87.50

SUBJECT: A GYN. OF HIALEAH, INC.  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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: BEIKIS GONZALEZ  
Name (Printed or typed)

17900 S.W. 4TH. Ct.  
Address

Pembroke Pines FL 33029  
City, State & Zip

(305) 362-4611  
Daytime Telephone number

FILED  
01 FEB - 8 PM 12:24  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

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

Handwritten signature and date: 2/9/01  
Handwritten initials: 4V

**FILED**

**ARTICLES OF INCORPORATION**

01 FEB -8 PM 12: 24

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

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

**ARTICLE I NAME**

The name of the corporation shall be:

A GYN. OF HIALEAH, INC.

**ARTICLE II PRINCIPAL OFFICE**

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

3671 WEST 16TH. AVE.  
HIALEAH, FLORIDA 33012-4619

**ARTICLE III SHARES**

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

FIVE HUNDRED (500) SHARES OF COMMON STOCK WITH A PAR  
VALUE OF ONE DOLLAR (1.00) EACH SHARE.

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

The name and address of the initial registered agent is:

BELKIS GONZALEZ

17900 S.W. 4TH. CT.

PEMBROKE PINES, FLORIDA 33029

**ARTICLE V INCORPORATOR(S)**

**See instructions for officers/directors**

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

PRES.  
FRANTZ BAZILE  
17900 S.W. 4TH. CT.  
PEMBROKE PINES, FL. 33029

V/PRES.  
SIOMARA SENISES  
3500 FAIRFAX LANE  
DAVIE, FLORIDA 33330

SECR.  
BELKIS GONZALEZ  
17900 S.W. 4TH. CT.  
PEMBROKE PINES, FLORIDA 33029

TRES.  
SIOMARA SENISES  
3500 FAIRFAX LANE  
DAVIE, FLORIDA 33330

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

28TH day of DECEMBER, ~~19~~ 2000.

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

Bazile President  
Signature  
Siomara Senises  
Signature  
Belkis Gonzalez  
Signature

**Notarization is not required**

**NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.**

**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 or 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: \_\_\_\_\_

A GYN. OF HIALEAH, INC.

2. The name and address of the registered agent and office is:

BELKIS GONZALEZ

(Name)

17900 S.W. 4TH. CT.

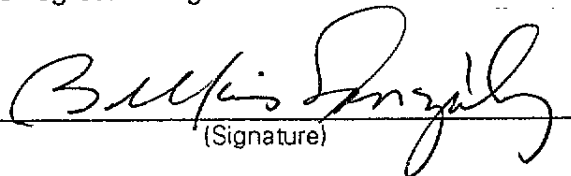
(P.O. Box not acceptable)

PEMBROKE PINES, FL. 33029

(City/State/Zip)

**FILED**  
01 FEB -8 PM 12:24  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

*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.*

  
(Signature)

12-28-2000