

PO1000087788

OFFICE USE ONLY (Document #)

LAZARUS CORPORATE FILING SERVICE

(Requestor's Name)

3320 S.W. 87 AVENUE

(Address)

MIAMI, FLORIDA (305)552-5973

(City, State, Zip)

(Phone #)

TERESA ROMAN (TALLAHASSEE REPRESENTATIVE)

200004572402--6

-09/06/01--01055--011

*****78.75 *****78.75

OFFICE USE ONLY

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. EL MILAGRO CARE CENTER, INC.
(Corporation Name) (Document #)

2. _____
(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

DIVISION OF CORPORATION

01 SEP -6 AM 10:19

RECEIVED

01 SEP -6 PM 2:13

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

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

PS/1/19/01

CERTIFICATION OF INCORPORATION

FILED
01 SEP -6 PM 2:13
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE ONE

NAME

The name of this corporation shall be:

EL MILAGRO CARE CENTER, INC.

ARTICLE TWO

This corporation may engage in any activity of business permitted under the laws of the United States of - America and the laws of the State of Florida.

ARTICLE THREE

TERM OF EXISTENCE

This corporation shall have perpetual existence, unless sonner dissolved in accordance with the laws of the - State of Florida. The date on which corporation existence sha_ ll begin ia the date of incorporation.

ARTICLE FOUR

MINIMUM CAPITAL

The amount of capital with which the corporation shall begin business shall not be less than Five Hundred -- - Dollars (\$500.00), or such grater amount as may be requerid by law.

ARTICLE FIVE

CAPITAL STOCK

This corporation is authorized to issue shares of stock as follows.

A. Designation: The stock of this corporation shall be known as Common Stock.

B. Authorized: The maximum number of shares of common Stock that this corporation may issue is: One Hundred - (100) shares, having a par value of(\$5.00) Five Dollars per - share.

C. Consideration: Shares of Common Stock may be issue in exchange per cash, real property, labor or services rendered, or any combination of the foregoing. In the absence of fraud in the transaction, the judgement of the Board of - Directors as to the value of any suck consideration shall be conclusive.

D. Voting Rights: Each share of Common Stock shall entitle the record holder thereof to one vote upon each proposal presented at meetings of the stockholders of the corporation.

E. Liquidation Rights: Holders of Common stock are entitled, in the event of the liquidation or dissolution of this corporation, to receive their pro-rata share of any assets of this corporation remaining after payment of all corporate debts and obligations.

ARTICLE SIX

NUMBER OF DIRECTORS

This corporation shall at all times have at least, one Director. The stockholders of this corporation may, from time to time, and at any time, increase or diminish the size of the Board of Directors of this corporation, provided that the corporation shall at all time have a minimum of one Director.

ARTICLE SEVEN

AMENDMENT

This certificate of incorporation may be amended in any manner consistent with the laws of the State of Florida.

ARTICLE EIGHT

SPECIAL VOTING PROVISIONS

The occurrences enumerated in this Article shall not be authorized, nor shall they have any force or effect, unless assented to in writing by the holders of the required percentage of this corporation's stock entitled to vote at the time of the proposal of any such occurrence. For each such occurrence, the required percentage shall be as follows:

1. Amendment of this Certificate of Incorporation:

Required percentage 51%

2. Sale, lease or exchange of all of this corporation's property and assets, or of any property or assets of this corporation essential to the business of this corporation:

Required percentage 51%

3. Merger or consolidation of this corporation into or with any other corporation:

Required percentage 51%

4. Voluntary dissolution of this corporation:

Required percentage 51%

ARTICLE NINESTOCKHOLDERS AND DIRECTORS

The names and addresses of the stockholders and directors are as follows:

<u>NAME</u>	<u>ADDRESS</u>	<u>OFFICE</u>	<u>SHARES</u>
Betsy M. Martinez	1105 West 69th Place Hialeah, Fl 33014	President , Secretary, Treasurer and Director	100

ARTICLE ELEVENREGISTERED AGENT

The registered agent and the registered office of this -- corporation shall be:

Betsy M. Martinez
1105 West 69th Place
Hialeah, Fl 33014

SUBSCRIBER, INITIAL DIRECTOR AND
INITIAL PRINCIPAL OFFICE

The undersigned individual, a United State resident competent to contract, executes this Certificate of Incorporation as its the subscribers and directors . The undersigned individuals shall hold office as a director until his successors have qualified, following their election or appointment. The - street address of such individual shall be the initial street address in Florida of the principal office of this corporation.

SUBSCRIBER/DIRECTOR: BETSY M. MARTINEZ

STREET ADDRESS/PRINCIPAL OFFICE: 1105 West 69th Place. Hialeah,
Fl 33014

IN WITNESS WHEREOF, the undersigned subscriber does make,

Subscriber, acknowledge and file this certificate for the purpose of forming a corporation for profit under the laws of the State of Florida.

DATE: 08/31/2001

Betsy M. Martinez
Betsy M. Martinez

STATE OF FLORIDA ss
COUNTY OF MIAMI-DADE

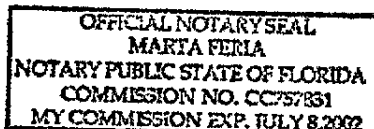
Before me the undersigned authority, personally appeared to me well known and known to me to be the individual described in, and who executed the foregoing Certificate of Incorporation- and who acknowledged before me that the same was executed for the purposes therein expressed.

In witness whereof, I have hereunto affixed my hand and official seal at Miami- Dade County, Florida.

Date. 08/31/2001

Marta Feria
NOTARY PUBLIC
STATE OF FLORIDA

My commission expires. _____



CERTIFICATE DESIGNATING PLACE OF BUSINESS OF DOMICILE FOR
THE SERVICE OF PROCESS WITHIN THIS STATE, ANMING AGENT UPON

WHOM PROCESS MAY BE SERVED

In pursuance of Chapter 48-091, Florida Statutes the
following is submitted, in compliance with said Act:

THAT EL MILAGRO CARE CENTER, INC.

desiring to organized under the laws of the State of Florida
with its principal office, as indicated in the Articles of-
Incorporation at the City of Hialeah, County Miami-Dade
State of Florida, has nemed:

BETSY M. MARTINEZ

as its agent to accept service of process wthin this State

BETSY M. MARTINEZ

Having been named to accept service of process for the
above stated Corporation , at the place designated in this
Certificate. I hereby accept to act in this capacity and -
agree to comply with the proviissions of said Act relative
to keeping open said office.

By Betsy Martinez
REGISTERED AGENT

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA