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TRANSMITTAL LETTER

FILED

02 JUN 10 PM 2:18

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

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-06/11/02--01007--002
*****78.75 *****78.75

SUBJECT:

Veloz Medical Services, Inc.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are 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:

Susana Veloz

Name (Printed or typed)

1260 W 32 ST

Address

Hialeah, FL 33012

City, State & Zip

305-389-6022

Daytime Telephone number

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

CBK

ARTICLES OF INCORPORATION FILED

of

02 JUN 10 PM 2:18

VELOZ MEDICAL SERVICES, INC.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The undersigned subscriber to these Articles of Incorporation is a natural person competent to contract and hereby form a Corporation for profit under Chapter 607 and/or Chapter 621 of the Florida Statutes.

ARTICLE I NAME

The name of the Corporation shall be:

VELOZ MEDICAL SERVICES, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

**1260 W 32 ST
HIALEAH, FL. 33012**

ARTICLE III PURPOSE

The purpose for which the Corporation is organized is:

This Corporation shall engage in any activity or business permitted under the laws of the United States and of the State of Florida

ARTICLE IV SHARES

The number of shares of stock is:

100 Shares

-cont-

-cont-

ARTICLE V INITIAL OFFICERS/DIRECTORS

The officers of the Corporation shall be:

**President: SUSANA VELOZ 1260 W 32 ST
HIALEAH, FL. 33012**

**Secretary: SUSANA VELOZ 1260 W 32 ST
HIALEAH, FL. 33012**

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

**SUSANA VELOZ
1260 W 32 ST
HIALEAH, FL. 33012**

ARTICLE VII INCORPORATOR

The name and address of the Incorporator are:

**SUSANA VELOZ
1260 W 32 ST
HIALEAH, FL. 33012**

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/Registered Agent Date

Date

Signature/Incorporator Date

Date