

PO20000094973

TRANSMITAL LETTER

YOEL VIERA

REGISTERED AGENT

9911 W OKECHOBEE RD #629

HIALEAH GARDENS. FL 33016

DATE: 08-07-2002

DOCUMENT EXAMINER

NEW FILING SECTION

SECRETARY OF STATE

DIVISION OF CORPORATIONS

TALLAHASSEE, FL 32302-1500

900007256159--1

-08/22/02--01003--002

\*\*\*\*122.50 \*\*\*\*\*78.75

SUBJECT: J.L. DIAGNOSTIC & REHABILITATION  
CENTER, INC.

(CORPORATE NAME)

Enclosed are an Original and One copy of Articles of Incorporation and a CHECK for \$ 122.50 for Filing Fee & Certified Copy.

Please return the Enclosed Articles to the Undersigned at the following address:

Ramiro J. Perez

BUSINESS CONTROL MANAGEMENT

145 Madeira Ave Suite 315

Coral Gables, Fl 33134



Thank you  
Registered Agent

FILED  
02 SEP -3 PM 1:25  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

W-24415

## CERTIFICATE OF INCORPORATION

### “ J.L. DIAGNOSTIC & REHABILITATION CENTER, INC “

We, the undersigned, hereby associated ourselves together for the purpose of becoming a corporation under the laws of the State of Florida by and under the provisions of the statutes of the State of Florida, providing for the formation, rights, provides, immunities and liabilities for profit.

#### ARTICLE I

The name of the corporation shall be:

### “ J. L. DIAGNOSTIC & REHABILITATION CENTER, INC“

#### ARTICLE II

The corporation will engage in any activity or business permitted under the laws of the State of Florida and of the United States of America.

#### ARTICLE III

The maximum number of shares which the corporation is authorized to issue and have outstanding at any one time is **500 shares** of common stock, which shares shall be of one dollar each (**\$1.00**).

#### ARTICLE IV

The pledge, sales, transfer or other disposition of the capital stock may be governed and restricted by the by-laws or written agreement among the stockholders, which shall be on file in the office of the corporation.

FILED  
02 SEP -3 PM 1:25  
CLERK OF STATE  
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE

Jim Smith  
Secretary of State

August 22, 2002

RAMIRO J PEREZ  
145 MADEIRA AVENUE SUITE 315  
CORAL GABLES, FL 33134

SUBJECT: J.L. DISGNOSTIC & REHABILITATION CENTER, INC  
Ref. Number: W02000024415

We have received your document for J.L. DISGNOSTIC & REHABILITATION CENTER, INC and your check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent and street address must be consistent wherever it appears in your document.

ALSO PLEASE VERIFY THE PRINCIPAL ADDRESS.,

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6931.

Becky McKnight  
Document Specialist  
New Filing Section

Letter Number: 902A00049369

## **ARTICLE V**

The amount of capital with which corporation may begin doing business shall be not less than one hundred dollars (**\$100.00**).

## **ARTICLE VI**

The existence of the corporation is perpetual.

## **ARTICLE VII**

The Initial Post Office Address of the Principal Office of the Corporation in the State of Florida is: 911 WEST OKECHOBEE ROAD.#629 HIALEAH GARDENS.FL 33016 The Board of Directors may, from time to time, move the principal office to any other address in the State of Florida. The registered address of corporation is:

911 WEST OKECHOBEE ROAD#629. HIALEAH GARDENS.FL 33016

. The Registered Agent at the Registered Address is: YOEL VIERA  
911 #629 WEST OKECHOBEE ROAD.HIALEAH GARDENS.FL 33016

## **ARTICLE VIII**

The business of the corporation shall be managed by a Board of Directors consisting of not less than one (1) nor more than two (2) directors. A quorum for the holding of meetings of the board of directors and for the transaction of any business which will be properly done by the directors on behalf of the corporation shall consist of a majority of the members thereof, but the directors, by

unanimous consent in writing, included among the minutes of the corporation, may consent to the doing of and act and such consent in writing shall have the same force and effect as though a formal meeting had been held pursuant to call being duly made and as though the said act had been present, or such duties may be delegated to an Executive Committee.

### ARTICLE IX

The names and post office addresses of the members of the First Boards of Directors and the state of Corporate Officers are as follows:

<u>NAME</u>	<u>TITLE</u>	<u>ADDRESS</u>
YOEL VIERA	President	911W OKECHOBEE RD #629.HIALEAH GARDENS

### ARTICLE X

The names and post office addresses of the articles of incorporation and number of shares that they agree to take are:

<u>NAME</u>	<u>ADDRESS</u>	<u>No. of SHARES</u>
YOEL VIERA	911 OKECHOBEE ROAD #629.HIALEAH GARDENS.FL 33016	100.%

The stock of the corporation may be issued pursuant to the provisions so Section 1244 of the Internal Revenue Code, so that the stockholders of the corporations may receive the benefits provided there under.

*In witness whereof*, we have hereunto set our hands and seal this August. 7TH 2002.

State of Florida )

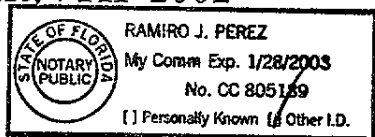
County of Dade )

*I hereby certify that* on this day, personally appeared before me, an officer duly authorized to administer oaths and taken acknowledgments under the laws of the State of Florida,

To me well known to be the persons described in and who executed the foregoing Certificate of Incorporation, and acknowledge before me that they executed the same freely and voluntary for the purpose there in expressed.

*Witness* my hand official seal at City of Miami, State of Florida, this

*August, 7TH 2002*



*[Signature]*  
Mr. Ramiro J. Perez  
Notary Public, State of Florida

My Commission Expires:

Certificate designation 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: **J. L. DIAGNOSTIC & REHABILITATION CENTER, INC.**

NAME OF THE CORPORATION

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 **YOEL VIERA**

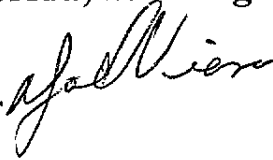
(REGISTERED AGENT)

located at **911 W OKECHOBEE ROAD. #629 HIEALEAH GARDENS. FL 33016**

(Street address and number of building)

**City of Miami, State of Florida, as its Agent to accept service of process within Florida.**

**Signature:**



**Title:**

**President**

**Date:**

**AUGUST, 7TH, 2002**

Having been named to accept service of process for above state 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:**



(REGISTERED AGENT)

**Date:**

**AUGUST 7TH<sup>T</sup> 2002**

**FILED**

**02 SEP -3 PM 1:25**

**SECRETARY OF STATE  
TALLAHASSEE, FLORIDA**