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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

OFFICE USE ONLY (Document #)

EXPRESS CORPORATE FILING SERVICE INC.
(Requestor's Name)

1000 PONCE DE LEON BLVD. STE: 101
(Address)

CORAL GABLES, FL 33134 305-444-4994
(City, State, Zip) (Phone #)

OFFICE USE ONLY

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

1. UNITED DOCTORS CARE, CORP.
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____ 800007508878--3
(Corporation Name) (Document #) -09/04/02--01009--020
*****78.75 *****78.75
4. _____
(Corporation Name) (Document #)

- ☐ Walk in ☒ Pick up time ☒ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS	
☒	Profit
☐	NonProfit
☐	Limited Liability
☐	Domestication
☐	Other

AMENDMENTS	
☐	Amendment
☐	Resignation of R.A., Officer/Director
☐	Change of Registered Agent
☐	Dissolution/Withdrawal
☐	Merger

OTHER FILINGS	
☐	Annual Report
☐	Fictitious Name
☐	Name Reservation

REGISTRATION/ QUALIFICATION	
☐	Foreign
☐	Limited Partnership
☐	Reinstatement
☐	Trademark
☐	Other

Examiner's Initials

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

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ARTICLE I NAME

The name of the corporation shall be:

UNITED DOCTORS CARE, CORP.

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ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

10150 NW 133 STREET
HIALEAH GARDENS, FL 33018

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY AND ALL LAWFUL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

ISABEL GUERRA (V)
JUAN PAULA (P)
10150 NW 133 STREET
HIALEAH GARDENS, FL 33018

ARTICLE VI REGISTERED AGENT

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

ISABEL GUERRA
10150 NW 133 STREET
HIALEAH GARDENS, FL 33018

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

ISABEL GUERRA
JUAN PAULA
10150 NW 133 STREET HIALEAH GARDENS, FL 33018

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Signature/Registered Agent

9/03/02

Date

Signature/Incorporator

9/03/02

Date