Division of Corporations

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To:		
	Division of	Corporations
	Fax Number	: (850)205-0381

From:

Account Name : FAS-T CORP. AGENTS, INC. Account Number : 071001002335 Phone : (305)599-0839 Fax Number : (305)716-0345

FLORIDA PROFIT CORPORATION OR P.A.

T & T MEDICAL CENTER, INC.

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

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ARTICLES OF INCORPORATION

OF

T & T MEDICAL CENTER, INC.

THE UNDERSIGNED, has executed the following document as incorporator of the above named corporation, a corporation organized under the laws of the State of Florida and all rights duties and obligations of the undersigned as incorporator, and those of the corporation, are to be determined in accordance with the laws of the State of Florida.

ARTICLE I

The name of the Corporation shall be:

T & T MEDICAL CENTER, INC.

<u>ARTICLE II</u>

This Corporation shall commence existence upon the filing of these Articles of Incorporation by the Department of State, State of Florida, and shall have perpetual existence.

<u>ARTICLE III</u>

This Corporation may engage or transact in any or all lawful activities or business permitted under the laws of the United States, State of Florida or any other state, country, territory or nation.

<u>ARTICLE IV</u>

The aggregate number of shares which this corporation shall have authority to issue is the total of 500 shares, having an individual par value of \$1.00 each, and shall be only Common class of stock on this corporation.

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ARTICLE V

The name and address of the initial registered agent, registered office, and principal office of this corporation shall be:

AGUSTIN SANTANA 13831 SW 28TH STREET Miami, FI, 33175

<u>ARTICLE VI</u>

The initial Board of Directors shall consist of a total of one person and the names of the person who is to serve as initial directors is:

ACUSTIN SANTANA

PRESIDENT/TREASURER

ARTICLE VII

The names and address of the incorporators executing these Articles of Incorporation is:

AGUSTIN SANTANA 13831 SW 28TH STREET MIAMI, FL 33175

AGUSTIN SANTANA

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In pursuance of Chapter 607.34 Florida Statutes, the following is submitted, in compliance with said Act:

First-That T & T MEDICAL CENTER, INC.______ (Name of Corporation)

desiring to organize under the laws of the State of <u>Florida</u> with its principal office, as indicated in the Articles of Incorporation at the City of ______MIAMI____County of ______MIAMI-DADE______ State of Florida has named ______AGUSTIN SANTANA______ (Name of Register Agent)

located at 13831 SW 28TH STREET (Street address and number of building, Post Office Box address not acceptable)

City of MIAMI , County of _____MIAMI-DADE

State of Florida, as its agent to accept service of process within this state.

ACKNOWLEDGMENT: (MUST BE SIGNED BY DESIGNATED AGENT) .

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

By;		
	AGUSTIN SANTANA	
	Register Agent	

FILED 02 NOV 26 AN 8: 30 SECRETARY OF STATE TALLAHASSEE, FLORIDA