

# P040000043134

Florida Department of State  
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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)716-0346

## FLORIDA PROFIT CORPORATION OR P.A.

### HEALTHCARE SOLUTIONS SERVICES, INC.

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$78.75

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ARTICLES OF INCORPORATION OF  
HEALTHCARE SOLUTIONS SERVICES, INC.

The undersigned incorporator for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I NAME

The name of this corporation is HEALTHCARE SOLUTIONS SERVICES, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

8075 NW 7<sup>th</sup> St. #305  
Miami, FL 33126

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

1000 shares of \$1.00 per value common stock

ARTICLE IV INITIAL BOARD OF DIRECTORS

This corporation shall have three (3) directors initially. The number of directors may be increased or diminished from time to time in accordance with by-laws adopted by the stockholders. The names and addresses of the initial board of directors are:

NAME	ADDRESS
Silvio Manga President, Secretary	1504 Bay Rd Dr., Ste # 2610 Miami Beach, FL 33139
Michael Gallo Director	1504 Bay Rd Dr., Ste # 2610 Miami Beach, FL 33139
Natalia Benitez Director	1504 Bay Rd Dr., Ste # 2610 Miami Beach, FL 33139

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ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Lucy Amparo Olarte  
8075 NW 7<sup>th</sup> St. #305  
Miami, FL 33126

ARTICLE VI INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

Lucy Amparo Olarte  
8075 NW 7<sup>th</sup> St. #305  
Miami, FL 33126

  
Lucy Amparo Olarte

March 5, 2004  
Date

ACKNOWLEDGMENT:

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.

  
Lucy Amparo Olarte

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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