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SECRETARY OF STATE DIVISION OF CARPOANTIONS



Trademark

Examiner's Initials

Other

## ARTICLES OF INCORPORATION

The undersigned Incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

#### ARTICLE 1 - NAME

The name of the corporation shall be:

Continental Medical Corporation

#### ARTICLE II - PRINCIPAL OFFICE

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

4343 West Flagler ST. suite 502 WANG FL 33134

# ARTICLE III -SHARES

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

100 shares

## ARTICLES IV -INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Fernando Palma H.D. 7928 West Drive #801 NORTH BAY VILLAGE MIAMI FL 33141

SECRETARY OF STATE DIVISION OF CONTORATIONS

# ARTICLE V - INCORPORATOR

		eet addres	s of the in	corporato	r to these A	rticles of
Incorpora	tion is:					
Fer	nand	s Palm	2 M.O		Bay Vi	1
79	28 We	STOriv	e #801	North	BAY W	lage
w.A	m ti	3314			1	1
The under	rsigned i	ncorporate	or has exe	cuted thes	e Articles o 20 <u>04</u>	f
Incorpora	tion this	$\frac{13}{3}$ day	of MAN	<u> </u>	20 <u>04</u>	
			N COLO		_	
			Situa	ture		

### ARTICLE VI- DIRECTOR(S)

The name(s) and street address(es) of the director(s) to these Articles of Incorporation is (are):

Fernando Palma MD. 7928 West Drive # 801 North Bay Village MANN FL.33141

PRESIDENT

# CERTIFICATE OF DESIGNATION OF REGISTERED AGENT /REGISTERED OFFICE

Having been named as Registered Agent and to accept service of process for the above stated corporation at 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 related to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as Registered Agent.

Registered Agent Signature