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(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP	WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates	of Status		
Special Instructions to Filing Officer:				



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12/09/01/0000 1000 **787.50

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TRANSMITTAL LETTER

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

SUBJECT:	JOTA GAMEZ CLINIC , INC (PROPOSED CORPORATE NAME – <u>MUST INCLUDE SUFFIX</u>)			
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	<u>ude suffix</u>)	
Enclosed are an orig	inal and one (1) copy of the art	icles of incorporation and	l a check for:	
□ \$70.00	☑ \$78.75	\$78.75	□ \$87.50	
Filing Fee	Filing Fee	Filing Fee	Filing Fee,	
	& Certificate of Status	& Certified Copy	Certified Copy & Certificate o	
	to the state of th	ADDITIONAL CO	Status DPY REQUIRED	
			. *	
FROM:	JOTA GAMEZ CLINIC, Inc			
	Name (Printed or typed)			
	30447 DOUBLE DR			
	Address			
	WESLEY CHAPEL, FL 33544			
	City, State & Zip			
	813(994-8798)			
		Telephone number		

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

JOTA GAMEZ CLINIC, Inc.

PRINCIPAL OFFICE ARTICLE II

The principal place of business/mailing address is: 30447 DOUBLE DR WESLEY CHAPEL, FL 33544

ARTICLE III **PURPOSE**

The purpose for which the corporation is organized is: Provide services of rehab., physical therapy, massage, relaxation treatment beauty care, and others, through the application of different modalities. Provide services of medical care. And any other lawful business in the US.

ARTICLE IV SHARES

The number of shares of stock is: 1000

INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

YANEIDIS GAMEZ 30447 DOUBLE DR WESLEY CHAPEL, FL 33544 PRESIDENT **ROBERT JOTA** 30447 DOUBLE DR WESLEY CHAPEL, FL 33544 VICE- PRESIDENT

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

YANEIDIS GAMEZ 30447 DOUBLE DR WESLEY CHAPEL, FL 33544

ARTICLE VII **INCORPORATOR**

The <u>name and address</u> of the Incorporator is:

YANEIDIS GAMEZ

WESLEY CHAPEL, FL 33544	
**************************************	*************
Having been named as registered agent to accept service of process for certificate, I am familiar with and accept the appointment as registered	
Lawer	12/7/04
Signaturo Rogistered Agent	Date
Chul Z	12/7/04
Signaturd/Incorporator	Date

