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# LAZARUS CORPORATE FILING SERVICE

CORPORATE FILING SERVICE 3320 SW 87TH AVENUE MIAMI, FL 33165 (305) 552-5973 Office Use Only CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): (Corporation Name) (Document #) (Document #) (Corporation Name) (Corporation Name) (Document #) Certified Copy Pick up time 2.00 Will wait Photocopy Certificate of Status Mail out **AMENDMENTS NEW FILINGS Profit** Amendment Not for Profit Resignation of R.A., Officer/Director Change of Registered Agent Limited Liability Dissolution/Withdrawal Domestication Other Merger **OTHER FILINGS** REGISTRATION/QUALIFICATION Annual Report Foreign Limited Partnership Fictitious Name Reinstatement Trademark Other

Examiner's Initials

#### 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 I - NAME**

The name of the corporation shall be:

Medicina Sin Fronteras Group, Corp

#### ARTICLE II - PRINCIPAL OFFICE

The principal place of business and mailing of this corporation shall be: 50.57 A/A = -4.44 A/A = -4

5077 NW 7 st Bldg 4-1404 Hiami, FL 33126

## **ARTICLE III -SHARES**

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

100

# ARTICLES IV -INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Juan Hanuel Oliva 5077 NW 7 ST BH 4-1404. Hiami, FL 33126.

#### **ARTICLE V - INCORPORATOR**

Juan Manuel Oliva)

The name and street address of the incorporator to these Articles of

Incorporation is:

The undersigned incorporator has executed these Articles of	
The undersigned incorporator has executed these Articles of	
Incorporation this 30 day of Movember 2005.	.> O <b>S</b>
Signature ARTICLE VI. DIRECTOR (S)	DED -1 VM IV: 24
The name(s) and street address (es) of the director(s) to these	•
	, 1
Juan Hanvel Oliva	President
Barbara Chauez Vice	e-Presiden-

## **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