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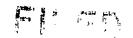
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ORPORATE FILING SE	RVICE
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CORPORATION NAME(S) & DOG	CUMENT NUMBER(S), (if known):
I.M.T. HEALTHS	ERVICES INC (Document #)
(Corporation Name)	(Document #)
2,(Corporation Name)	(Document #)
3. (Corporation Name)	(Document #)
4	
(Corporation Name)	(Document #)
Walk in Pick up time	
Mail out Will wait	Photocopy Certificate of Status
NEW FILINGS	<u>AMENDMENTS</u>
Profit Not for Profit Limited Liability Domestication Other	Amendment Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger
OTHER FILINGS	REGISTRATION/QUALIFICATION
☐ Annual Report ☐ Fictitious Name	Foreign Limited Partnership Reinstatement Trademark Other

Examiner's Initials

FAX NO. :3052201440

Jan. 24 2006 01:21PM P2



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ARTICLES OF INCORPORATION TALL AHASSIES LORIDA

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:

M.T. HEALTH SERVICES INC

ARTICLE II - PRINCIPAL OFFICE

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

519 EAST 53rd STREET HIALEAH FLA 33013

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:

MIGUEL TORRES
5500 EAST 7th AVE
HIALEAH FLA 33013

06 MAR 24; PH 2: 43
SECRETARY AT STATE
TALL AHASSES FLORIDA

ARTICLE V - INCORPORATOR

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

MIGUEL TORRES 519 EAST 53rd STREET HIALEAH FLA 33013

The undersigned incorporator has executed these Articles of Incorporation this 23 day of MARCH 2006

ARTICLE VI- DIRECTOR (S)

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

MIGUEL TORRES 519 EAST 53rd STREET HIALEAH FLA 33013

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