

P06000045920

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

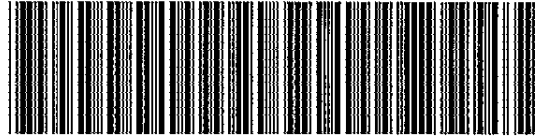
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100068157561

03/29/06--01032--017 **78.75

RECEIVED
06 MAR 29 PM 12:28
DIVISION OF CORPORATION

VH

**LAZARUS
CORPORATE FILING SERVICE**

3320 SW 87TH AVENUE

MIAMI, FL 33165 (305) 552-5973

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. FINLAY MEDICAL CARE CENTER, CORP.
(Corporation Name) (Document #)

2. _____
(Corporation Name) (Document #)

3. _____
(Corporation Name) (Document #)

4. _____
(Corporation Name) (Document #)

☒ Walk in ☒ Pick up time 2.00 ☒ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS

- ☒ Profit
☐ Not for Profit
☐ Limited Liability
☐ Domestication
☐ Other

OTHER FILINGS

- ☐ Annual Report
☐ Fictitious Name

AMENDMENTS

- ☐ Amendment
☐ Resignation of R.A., Officer/Director
☐ Change of Registered Agent
☐ Dissolution/Withdrawal
☐ Merger

REGISTRATION/QUALIFICATION

- ☐ Foreign
☐ Limited Partnership
☐ Reinstatement
☐ Trademark
☐ Other

Examiner's Initials

ARTICLES OF INCORPORATION

(name of corporation)

The undersigned subscriber(s) the these Articles of Incorporation, natural person(s) competent to contract, hereby from a corporation under the laws of the State of Florida

ARTICLE I - CORPORATE NAME

The name of the corporation is:

FINLAY MEDICAL CARE CENTER, Corp

ARTICLE II - DURATION

This corporation shall exit perpetually unless dissolved according to Florida law.

ARTICLE III - PURPOSE

The corporation is organized for the Purpose of engaging in any activities or business permitted under the laws of the United States and the State of Florida.

The corporation is authorized to issue FIVE ~~Hundred~~ shares (500) of ONE ~~ONE~~ dollars(s) (\$1.00) par value common stock, which shall be designated "Common Shares".

ARTICLE V - INITIAL REGISTERED OFFICE AND AGENT

The street address of the Initial Registered Agent office the name of Initial Registered Agent at that office is:

NAME	<u>IVAN LAMBERT</u>
ADDRESS	<u>4562 W. 12th AVE</u>
CITY	<u>HIWALEAH, FL 33012</u>

The principal office, if known, or the mailing address of the corporation is:

NAME	<u>FINLAY MEDICAL CARE CENTER, Corp</u>
ADDRESS	<u>4562 W 12th AVE</u>
CITY	<u>HIWALEAH, FL 33012</u>

ARTICLE VI - INITIAL BOARD OF DIRECTORS

This corporation shall have (two, 2) directors initially. The number of directors may be either increased or diminished from time to time by the By-Laws, but shall never be less than one(1). The names and addresses of the initial director(s) of the corporation are follows

NAME	<u>IVAN LAMBERT</u>	<u>(President)</u>
ADDRESS	<u>4562 W 12th AVE</u>	
CITY	<u>HIWALEAH, FL 33012</u>	
NAME	<u>BEATRIZ D. COSCULLUELA</u>	<u>Vice-President</u>
ADDRESS	<u>4562 W 12th AVE</u>	
CITY	<u>HIWALEAH, FL 33012</u>	
NAME		
ADDRESS		
CITY		

CERTIFICATE AND ACKNOWLEDGEMENT OF REGISTERED AGENT

Certificate of registered Agent
OF

Finlay Medical Care Center, Corp.
(name of corporation)

Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted:

The above corporation, desiring to organize under the laws of the State of Florida with its registered office as indicated in the Articles of Incorporation

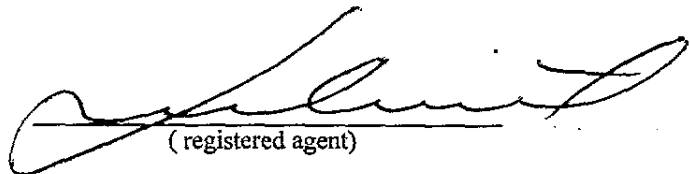
At 4562 W 12th AVE
HALEAH, FL 33012

Has name IVAN LAMBERT

Located at the aforesaid address, as its Registered Agent to accept service of process within this state.

ACKNOWLEDGEMENT

Having been named as Registered Agent to accept service of process for the above state corporation at the place designated in this certificate and being familiar with the obligations of that position, I hereby accept to act in this capacity, and agree to comply with the provisions of florida law in keeping open said office.

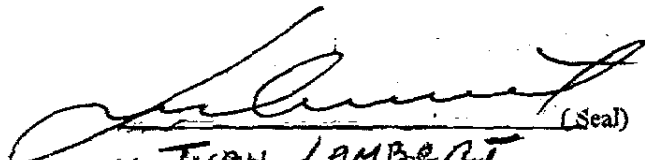
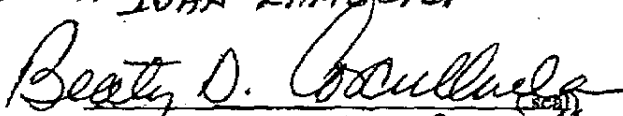

(registered agent)

ARTICLE VII- INCORPORATORS

The names and addresses of the incorporators signing these Articles of Incorporation are as follows:

NAME	IVAN LAMBERT
ADDRESS	4562 W 12 th AVE
CITY	HALEAH, FL 33012
NAME	BEATRIZ D. COSCULLUELA
ADDRESS	4562 W 12 th AVE
CITY	HALEAH, FL 33012.
NAME	
ADDRESS	
CITY	

IN WITNESS WHEREOF, the undersigned subscriber(s) have executed these Articles of Incorporation this 28 day of MARCH, 2006.


(Seal)
IVAN LAMBERT

(Seal)
BEATRIZ D. COSCULLUELA

(Seal)