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# **LAZARUS**

CORPORATE FILING SERVICE 3320 SW 87<sup>TH</sup> AVENUE MIAMI, FL 33165 305-552-5973

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CORPORATION NAME(S) & DO	OCUMENT NUMBER(S), (if known):	
1. CENTURY MES	DICAL INC	
(Corporation Name)	(Document #)	
2		
(Corporation Name)	(Document #)	
3.		•
(Corporation Name)	(Document #)	
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OTHER FILINGS	REGISTRATION/QUALIFICATION	
Annual Report Fictitious Name	Foreign Limited Partnership Reinstatement Trademark Other	
	Examiner's Initials	
CR2E031(7/97)	<u></u>	

#### 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: CENTURY ONE MEDICAL INC.

#### **ARTICLE II - PRINCIPAL OFFICE**

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

9349 SW 40 ST MIAMI Fla 33165

#### **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:

MAYIEN Norales

9349 SW 40 St

Miami Fla 33165

SECRETARY OF STATIONS
DIVISION OF CORPORATIONS

#### ARTICLE V - INCORPORATOR

The name and street ac	ldress of	the incorporate	or to these Articles of
Incorporation is:	Λ	1	
Maylew	Sonal	er.	
9349 S The undersigned incorp	w 4	ost	
MiA	11 FIA	33165	
The undersigned incor	porator ha	as executed the	ese Articles of
incorporation this	day of	6-22-	200 <b>6.</b>
	SJZ1	40.	

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## **ARTICLE VI- DIRECTOR (S)**

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

Mayler Monales (PREsidente)

9349 SW 4057

Miami Fla 33165

#### 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

PILED SECRETARY OF STAIL DIVISION OF CORPORATIONS