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LAZARUS CORPORATE FILING SERVICE

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CORPORATION NAME(S) & DOCUME		•
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(Corporation Name)	(Document #)	
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(Corporation Name)	(Document #)	
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☐ Mail out ☐ Will wait	Photocopy Certificate of Status	
NEW FILINGS	AMENDMENTS	
Profit		
Not for Profit	Amendment Resignation of R.A., Officer/Director	,
Limited Liability	Change of Registered Agent	
Domestication Other	Dissolution/Withdrawal Merger	
	Morger	
OTHER FILINGS	REGISTRATION/QUALIFICATION	
Annual Report	☐ Foreign .	
Fictitious Name	Limited Partnership	
	Reinstatement Trademark	
	Other	
		
CR2E031(7/97)	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:

PB Medical service Corp

2006 SEP 19 AM 11:58
SECRETARY OF STATE
TALLAHASSEE, FLORID

ARTICLE II - PRINCIPAL OFFICE

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

715 SW 17 Ave Svite #303. Miami F/33135

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:

PAVELLUIS RUIZ

2155W17 Ave. #303.

Miami F/33135

ARTICLE V - INCORPORATOR

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

Pavel Luis Ruiz 215 5W17 Ave #303 Hismi FL 33/35

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

Signature

ARTICLE VI- DIRECTOR (S)

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

Pavel LUIS RUIZ - PRESIDENT

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