| (Re                     | equestor's Name)   |                                       |
|-------------------------|--------------------|---------------------------------------|
|                         |                    |                                       |
| (Ad                     | dress)             |                                       |
|                         |                    |                                       |
| (Ad                     | ldress)            |                                       |
|                         |                    |                                       |
| (Cit                    | ty/State/Zip/Phone | e #)                                  |
|                         |                    |                                       |
| PICK-UP                 | ☐ WAIT             | MAIL                                  |
|                         |                    |                                       |
| (D)                     | lainana Entity Nan | 20)                                   |
| (Br                     | isiness Entity Nan | ne)                                   |
|                         |                    | · · · · · · · · · · · · · · · · · · · |
| (Do                     | ocument Number)    |                                       |
|                         |                    |                                       |
| Certified Copies        | _ Certificates     | of Status                             |
|                         |                    |                                       |
| Special Instructions to | Filing Officer:    |                                       |
|                         |                    |                                       |
|                         |                    | l                                     |
|                         |                    |                                       |
|                         |                    |                                       |
|                         |                    |                                       |
|                         |                    |                                       |
|                         |                    |                                       |
|                         | -                  |                                       |





600082479046

12/27/06--01032--008 \*\*78.75

# LAZARUS CORPORATE FILING SERVICE

3320 SW 87<sup>TH</sup> AVENUE

CR2E031(7/97)

|   | 4  |
|---|--|
| MIAMI, FL 33165 (305) 552-59                                | 73   |
|   | Office Use Only  |
| CORPORATION NAME(S) & DOCUME                                | CNT NUMBER(S), (if known):   |
| 1. ALVARO I. (Corporation Name)                             | JARAMILLO Po Ao (Document#)  |
| 2   |  |
| (Corporation Name)  | (Document #)   |
| 3. (Corporation Name)                                       | (Document #)   |
|   |  |
| 4. (Corporation Name)                                       | (Document #)   |
| Walk in Pick up time  | 2.60 — Certified Conv  |
| Walk in Pick up time  | Photocopy Certificate of Status  |
| NEW FILINGS   | AMENDMENTS   |
| 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  |

#### ARTICLES OF INCORPORATION **OF**

The undersigned incorporator(s), for the purpose of forming a Professional Service Corporation under Chapter 621 of the Florida Statutes, hereby adopt(s) the following **Articles of Incorporation** 

#### ARTICLE I NAME

The name of the corporation shall be:

Alvaro I. Jaramillo P.A.

#### ARTICLE II PRINCIPAL OFFICE

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

8768 5.W 3rd Lane Miami, FL 33174

ARTICLE III PURPOSE

The purpose of this corporation shall be:

Real State

#### ARTICLE IV CAPITAL STOCK

The number of shares of stock that this corporation is authorize to have outstanding is:

100

#### ARTICLE V INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:

Alvaro I. Jaramillo

8768 5.W. 3-d Lane

Miami, FL 33174

### ARTICLE VI BOARD OF DIRECTOR (S)

The name and address of the initial board of director(s) shall be:

| The name and address of the initial board of director(s) shall be:                       |
|--|
| Alvaro I. Jaramillo<br>8768 5. W. 3rd Lane   |
|  |
| Micron, FI 33174   |
| ARTICLE VII OFFICER (S)  |
| The name, title and address of the officer(s) of this corporation shall be:              |
| Alvaro I. Jaramillo President  |
| 8768 5. W. 3rd Lane  |
| Mlami, Fl 33174  |
| 33174  |
|  |
| ARTICLE VIII INCORPORATOR (S)  |
| The name and address of the incorporator(s) to these Articles of Incorporation shall be: |
| Alvaro I. Jarzmillo<br>8768 S.W. Frd Lane  |
|  |
| Miam, Fl 33174   |
| The undersigned has (have) executed these Articles of Incorporation this day of          |
|  |
| Incorporator Signature   |
|  |

## CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERD OFFICE

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THE ARTICLES OF INCORPORATION, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING 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

SECRETARY OF STATE

APPHOVED