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### LAZARUŚ CORPORATE FILING SERVICE

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CORPORATION NAME(S) & DOCUMENT MAYELIN VALDES	T NUMBER(S), (if known):	
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OTHER FILINGS	REGISTRATION/QUALIFICATION	•
Annual Report Fictitious Name	Foreign Limited Partnership Reinstatement Trademark Other	; . · <i>/-</i>

## 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:

Mayelin Valdes, P.A.

#### ARTICLE II PRINCIPAL OFFICE

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

1660 SW 66 CT West Hlami, FC 33155

Hedreal Practice

ARTICLE III PURPOSE

The purpose of this corporation shall be:

ARTICLE IV CAPITAL STOCK

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

117)

#### ARTICLE V INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:

Hayelin Valdes 1660 Sw 66 Ct West Mami, FL 33155. 2007 FEB 16 AM II: SECRETARY OF STATE

#### ARTICLE VI BOARD OF DIRECTOR (S)

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

Mayelin Valdes 1660 SW 66Ct West Hami, FL 33155

#### **ARTICLE VII OFFICER (S)**

The name, title and address of the officer(s) of this corporation shall be:

Hayelin Valdes, President 1660 sw 66 Ct West Miami, FL 33155

#### **ARTICLE VIII INCORPORATOR (S)**

The name and address of the incorporator(s) to these Articles of Incorporation shall be:

Mayelin Valdes 1660 Sw 66ct West Miami, Fl 33155

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