

P07000023620

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

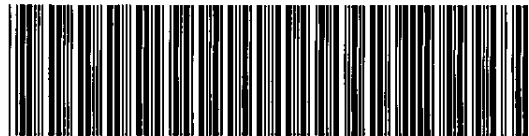
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



000085556820

02/21/07--01023--009 \*\*78.75

FILED

07 FEB 21 AM 9:09

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

RECEIVED

DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS

2007 FEB 21 AM 11:11

NOT RETURNED  
TO ACKNOWLEDGE  
SUFFICIENCY OF FILING

J. Shivers FEB 22 2007

**LAZARUS  
CORPORATE FILING SERVICE**

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

**MIAMI, FL 33165 (305) 552-5973**

Office Use Only

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

1. MACEDO-CALAFELL MEDICAL INC.  
(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

RECORDS SECTION  
TALLAHASSEE, FLORIDA

07 FEB 21 AM 9:09

FILED

**NEW FILINGS**

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

**AMENDMENTS**

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

**OTHER FILINGS**

- ☐ Annual Report
- ☐ Fictitious Name

**REGISTRATION/QUALIFICATION**

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

Examiner's Initials

ARTICLES OF CORPORATION  
OF

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 CORPORATION shall be:

MACEDO -CALAFELL MEDICAL INC.

FILED  
07 FEB 21 AM 9:09  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE:

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

14511 SW 146 Place Miami, Florida. 33186.

ARTICLE III - PURPOSES AND BRANCHES.

a) Medical Coding and Billing Services in Miami City, all this Country and open branches all over the world.

ARTICLES IV CAPITAL STOCK

The number of shares of stocks. This Corporation is authorized to have outstanding at any one time is: 100 Shares with value of \$ 10.00. each . Total \$ 1,000.00 ( One thousand dollars )

ARTICLES V - INITIAL REGISTERED AGENT AND ADDRESS:

Alexandre Macedo. 14511 SW 146 Place Miami, Florida. 33186. Phone No. 786-521-7706.

PAGE No. 2

ARTICLES VI INCORPORATOR ( S )

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

ALEXANDRE MACEDO  
14511 SW 146 PLACE  
Miami, Florida. 33186

PRESIDENT : ALEXANDRE MACEDO


VICE-PRESIDENT: DAVID CALAFELL ADDRESS: 15121 SW 164 Terr  
Miami, Fl. 33187

TREASURER: DAVID CALAFELL

SECRETARY: ALEXANDRE MACEDO

The undersigned has ( have ) executed these Articles of Incorporation this :  
MACEDO - CALAFELL MEDICAL INC.

  
Signature: Title President -- Secretary  
ALEXANDRE MACEDO:

  
Signature: Title Vice-President -- Treasurer  
DAVID CALAFELL

CERTIFICATE OF DESIGNATION  
REGISTERED AGENT – REGISTERED OFFICE

Pursuant to the Provisions of Section 607.325, Florida Statutes, the undersigned Corporation, organized under the Law of the State of Florida, submits the following statement in designation the registered office / registered agent in the State the Florida.

- 1 - The name of the Corporation is: MACEDO – CALAFELL MEDICAL INC.
- 2 - The name and address of the Registered Agent and Office is:

ALEXANDRE MACEDO  
14511 SW 146 PLACE  
MIAMI, FLORIDA. 33186  
OFFICE : The same above.


Signature of Corporate Officer:

Title: President.

Date: February 19, 2007.

FILED  
07 FEB 21 AM 9:09  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Having named to accept services on process for the above stated corporation at the place designated in this certificate, I hereby agree to act in this capacity and I further agree to comply with performance of my duties and I accept the duties and obligations of Section 607.325, Florida. Statutes.

Signature:   
Date: February 19, 2007.  
D/L M230-000-76-1500

Sworn and subscribed before me:  
Miami, Florida. February 19, 2007.

NOTARY PUBLIC: 

