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Florida Department of State
Division of Corporations
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(((H07000306683 3)))

Effective Date

01-02-08



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FLORIDA PROFIT/NON PROFIT CORPORATION

MAGALY PEREZ, P.A.

Certificate of Status	0
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**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

Effective Date

01-02-08

ARTICLE I NAME

The name of the corporation shall be: *MAGALY PEREZ, PA.*
(EFFECTIVE DATE 01-02-08)

ARTICLE II PRINCIPAL OFFICE

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

*629 NW 43 PL
MIAMI, FL 33126*

ARTICLE III PURPOSE

The purpose of this corporation shall be: *NURSING SERVICES.*

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:

*MAGALY PEREZ.
629 NW 43 PL
MIAMI, FL 33126*

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FROM : LAZARUS

FAX NO. : 3052201440

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ARTICLE VI BOARD OF DIRECTOR (S)

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

MAGALY PEREZ
629 NW 43 PL
MIAMI, FL 33126

ARTICLE VII OFFICER (S)

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

MAGALY PEREZ (PRESIDENT)
629 NW 43 PL
MIAMI, FL 33126

ARTICLE VIII INCORPORATOR (S)

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

MAGALY PEREZ
629 NW 43 PL
MIAMI, FL 33126

The undersigned has (have) executed these Articles of Incorporation this 27 day of
DECEMBER, 2007.



Incorporator Signature

H 07 000 30 66 83

FROM : LAZARUS

FAX NO. : 3052201440

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**CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED 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

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