# P0900005382

(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



100139842721

01/16/09--01809--006 \*\*78.75

RECEIVED

NUMBER

NUMB

JAN 2.0 2009 D. A. WHITE

1009 JAN 16 P 12: 56
SECRETARY OF STATE

## **LAZARUS**

## CORPORATE FILING SERVICE

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

MIAMI, FL 33165 (305) 552-5973

and the second s	Office Use Only
PORATION NAME(S) & DOCUM	IENT NUMBER(S), (if known):
VENUS HEAL (Corporation Name)	
	·
(Corporation Name)	(Document #)
:	·
(Corporation Name)	(Document #)
(Corporation Name)	(Document #)
Walk in Pick up time	Certified Copy
Mail out Will wait	Photocopy
	••.
EW FILINGS	<u>AMENDMENTS</u>
Profit Not for Profit	Amendment
Limited Liability	Resignation of R.A., Officer/Director Change of Registered Agent
Domestication	☐ Dissolution/Withdrawal
Other	☐ Merger
THER FILINGS	REGISTRATION/QUALIFICATION
Annual Report	Foreign
Fictitious Name	Limited Partnership Reinstatement
	Trademark
	Other ,
· .	Examiner's Initials
E031(7/97)	Examine 2 Initials

### FILED

#### ARTICLES OF INCORPORATION

2009 JAN 16 P 12: 56

THE UNDERSIGNED INCORPORATOR(S), FOR THE PURPOSE OF STATE TALL'AHASSEE ELORIDA 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:

CENTER CORP. VENUS HEALTH

#### **ARTICLE II - PRINCIPAL OFFICE**

THE PRINCIPAL PLACE OF BUSINESS AND MAILING OF THIS **CORPORATION SHALL BE:** 

2450 SW 137 AVE BUIL # 226 MIAMI F1. 33175.

#### **ARTICLE III - SHARES**

THE NUMBER OF SHARES OF STOCK THAT THIS CORPORATION IS AUTHORIZED TO HAVE OUTSTANDING AT ANY ONE TIME IS:

100.

<u>ARTICLE IV - INITIAL REGISTERED AGENT AND STREET ADDRESS</u>

THE NAME AND ADDRESS OF THE INITIAL REGISTERED AGENT IS

20482 SOO 132 CH MIAY! 7/ 33177.

#### **ARTICLE V - INCORPORATOR**

THE NAME AND STREET ADDRESS OF THE INCORPORATOR TO THESE ARTICLES OF INCORPORATION IS:

 CARIDAD W 132 CH M			
ED INCORPORATO OF INCORPO 5 DAY OF	RATION THIS	TED THESE ARTIC	)LES
J. G. SIGNA	ATURE	<b></b>	

#### **ARTICLE VI - DIRECTOR(S)**

THE NAME(S) AND STREET ADDRESS (ES) OF THE DIRECTOR(S) TO THESE ARTICLES OF INCORPORATION IS (ARE):

CARIDAD ESCAULO. PERCIDA

#### 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