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OBJECTARY OF STATE

TALLAHASSEE, FLORID.

W09-5014

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## **COVER LETTER**

Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

SUBJECT: The	Prestige Institute (PROPOSED CORPORA d Spa, Corf	e for Acoth TENAME-MUSTINCL	etic Sugery ude suffix)
E Ma	d spa, corf		
Enclosed are an orig	inal and one (1) copy of the artic	cles of incorporation and	a check for:
\$70.00 Filing Fee	\$78:75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED
FROM:	8501 3	Polonco, r Printed or typed)  Address	<u>mo.</u> <u>ue s</u> te.102
	Mian		53183
	Daytime T	505 - 220 Gelephone number	14

NOTE: Please provide the original and one copy of the articles.



February 2, 2009

ROBERTO POLANCO, MD 8501 SW 124 AVE STE 102 MIAMI, FL 33183

SUBJECT: THE PRESTIGE INSTITUTE FOR AESTHETIC SURGERY & MED

SPA, CORP

Ref. Number: W09000005014

We have received your document for THE PRESTIGE INSTITUTE FOR AESTHETIC SURGERY & MED SPA, CORP and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must have a Florida street address. A post office box is not acceptable.

You must list at least one incorporator with a complete business street address.

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6931.

Letter Number: 309A00003658

Becky McKnight Regulatory Specialist II New Filing Section

Division of Communitions D.O. DOV 2007 M. H. L. El. 11, 2001 A.

## ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit) <u>ARTICLE I NAME</u> The name of the corporation shall be; institute for Aestretic Surjery ARTICLE II PRINCIPAL OFFICE The principal street address and mailing address, if different is: 8501 SW 124 ave. Ste 102 miami, FL 33183 ARTICLE III PURPOSE The purpose for which the corporation is organized is: Drs office ARTICLE IV SHARES The number of shares of stock is: ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s): Roberto C. Polanco, MD 8501 SW124 AUR STE 102 MICHM!, FC 32183 The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: The name and address of the Incorporator is: Having been hamed as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I em familiar with and accept the appointment as registered agent and agree to act in this capacity Date