

P09000028458

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

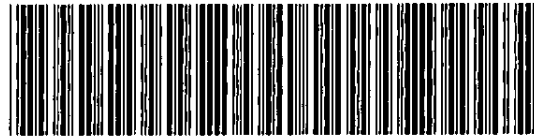
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



100147316491

03/27/09--01009--002 \*\*78.75

RECEIVED  
09 MAR 27 AM 10:19  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

FILED  
2009 MAR 27 PM 4:42  
DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

T. Burch MAR 30 2009.

# 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. JAIME G. GUTIERREZ M.D P.A.  
(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

### 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

FILED

2009 MAR 27 PM 4: 42

**ARTICLES OF INCORPORATION  
OF**

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*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: JAIME G. GUTIERREZ M.D P.A.**

**ARTICLE II PRINCIPAL OFFICE**

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

881 OCEAN DR SUITE L2  
KEY BISCAYNE, FL 33149

**ARTICLE III PURPOSE**

**The purpose of this corporation shall be:**

PHYSICIAN

**ARTICLE IV CAPITAL STOCK**

**The number of shares of stock that this corporation is authorized to have outstanding at any one time is: FIVE (500) HUNDRED SHARES ONE DOLLAR (1) PER VALUE COMMON STOCK**

**ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS**

**The name and address of the initial registered agent is:**

JAIME G. GUTIERREZ  
881 OCEAN DR. STE L2  
KEY BISCAYNE, FL 33149

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

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

JAIME G. GUTIERREZ  
881 OCEAN DR. STE L2  
KEY BISCAYNE, FL 33149

**ARTICLE VII OFFICER(S)**

**The name(s) and street address(es) of the officer(s) of this corporation shall be:**

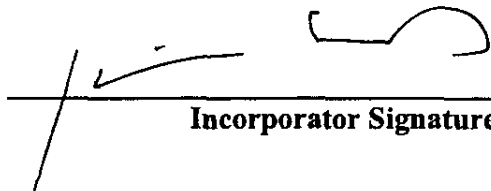
JAIME G. GUTIERREZ (PRESIDENT & SECRETARY)  
881 OCEAN DR. SUITE L2  
KEY BISCAYNE, FL 33149

**ARTICLE VIII INCORPORATOR(S)**

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

JAIME G. GUTIERREZ  
881 OCEAN DR. STE L2  
KEY BISCAYNE, FL 33149

**The undersigned incorporator(s) has (have) executed these Articles of Incorporation this 25 day of MARCH 2009.**

  
\_\_\_\_\_  
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**