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60-5-9

# LAZARUS

## CORPORATE FILING SERVICE

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

1. Ana M. Barrocas, M.D., P.A.  
(Corporation Name) (Document #)
2. \_\_\_\_\_  
(Corporation Name) (Document #)
3. \_\_\_\_\_  
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### NEW FILINGS

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

### OTHER FILINGS

- ☐ Annual Report
- ☐ Fictitious Name

### AMENDMENTS

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

### REGISTRATION/QUALIFICATION

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

Examiner's Initials

## **ARTICLES OF INCORPORATION**

**ANA M. BARROCAS, M.D., P.A.**

The undersigned, subscriber to these Articles of Incorporation, a natural person competent to contract, hereby presents these Articles of Incorporation for the formation of a professional corporation under the provisions of Chapter 621 of the Florida Statutes, also known as The Professional Services Corporation Act, and other laws of the State of Florida.

### **ARTICLE I - NAME**

The name of the Corporation shall be:

Ana M. Barrocas, M.D., P.A.

### **ARTICLE II – ADDRESS(ES)**

The address of the principal place of business is:

525-27 SW 80<sup>th</sup> Avenue  
Miami, FL 33144

The mailing address of the corporation is:

P. O. Box 83-2670  
Miami, FL 33283-2670

### **ARTICLE III - PURPOSE**

The purpose of this professional corporation is:

1. To perform professional medical services as Medicine Doctor(s) (M.D.), and
2. To engage in any activity or business permitted for professional medical service corporations under the laws of the United States and of the State of Florida.

### **ARTICLE IV - NUMBER OF SHARES**

The number of shares of stock that this corporation is authorized to have outstanding is:

100

### **ARTICLE V - INITIAL REGISTERED AGENT**

The name and address of the initial registered agent is:

Ana M. Barrocas,  
525-27 SW 80<sup>th</sup> Avenue  
Miami, FL 33144

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## ARTICLE VI - INITIAL BOARD OF DIRECTORS

The name, title and address of the officers of this professional corporation are:

Ana M. Barrocas,	President	525-27 SW 80 <sup>th</sup> Avenue Miami, FL 33144
Marcia C. González	Vice-President	6490 SW 130 <sup>th</sup> Ave # 1603 Miami, FL 33183

## ARTICLE VII - INCORPORATOR

The name and address of the incorporator signing these Articles of incorporation are as follows:

Ana M. Barrocas,  
525-27 SW 80<sup>th</sup> Avenue  
Miami, FL 33144

## ARTICLE VIII - SPECIAL PROVISIONS

The corporation shall have all corporate powers permitted to professional medical services corporations comprised of medicine doctors under the laws of the United States and of the State of Florida. The following additional provisions for the regulations of its members, the Board of Directors shall have the authority to establish reasonable compensation of all directors for services to the corporation as directors, officers and otherwise. In addition to the authority to establish salaries, the authority vested in the Board of Directors by this paragraph shall include the authority to establish the payment of bonuses, stock options, pension, profit sharing plans and incentive plans.

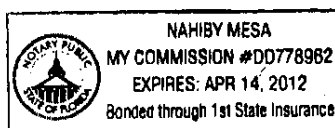
In witness whereof, the undersigned subscriber has executed these Articles of Incorporation this 03th day of June, 2009.

  
\_\_\_\_\_  
Ana M. Barrocas, M.D.  
Incorporator

State of Florida            )  
                                      )ss  
County of Miami-Dade )

Before me, the undersigned authority did personally appeared Ana M. Barrocas, M.D. the person(s) known by me or who provided proper identification to be the person described in and who executed the foregoing Articles of Incorporation and who freely and voluntarily acknowledged before according to law that she made and executed the same for the uses and purposes therein mentioned and set forth. In witness whereof, I have hereunto set my hand and affixed my official seal in the state and county aforesaid, this 03th day of June, 2009.

My Commission Expires: 2012



  
\_\_\_\_\_  
Notary Public, State of FL, At Large

**CERTIFICATE OF DESIGNATION  
REGISTERED AGENT/REGISTERD OFFICE**

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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**