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COVER LETTER

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

SUBJECT:	DAMAR HEALTHCARE CONSULTING, INC.								
	(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)								
Enclosed are an origi	nal 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	\$87.50 Filing Fee, Certified Copy & Certificate						
		Status ADDITIONAL COPY REQUIRED							
FROM:	DANA (GONZALEZ							
	Name (Printed or typed)								
	14266	SW 154 ST							
		ddress							
	NALANAL TI	ORIDA 33177							
· .	•	State & Zip							
786-443-9574 Daytime Telephone number dana_gonzalez@bellsouth.net									
					E-mail address: (to be used for future annual report notification)				

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

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

DAMAR HEALTHCARE CONSULTING, INC.

ARTICLE II PRINCIPAL OFFICE

The principal <u>street</u> address and mailing address, if different is: 14266 SW 154 ST MIAMI FL 33177

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ANY AND ALL LAWFULL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is:

100 SHARES

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

DANA GONZALEZ

14266 SW 154 ST MIAMI FL 33177

PRESIDENT

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

DANA GONZLEZ

14266 SW 154 ST MIAMI FL 33177

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

DANA GONZALEZ

14266 SW 154 ST MIAMI FL 33177

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity.

auaxend

ignature/Registered/A

lignature/Incorporator

6 | 15 | 09 Date 6 | 15 | 15 |

Date



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