

FD9000057687

Division of Corporations

Page 1 of 1

Florida Department of State
Division of Corporations
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H090001576183)))



H090001576183ABC4

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (950) 617-6381

From:

Account Name : EXPRESS CORPORATE FILING SERVICE INC.
Account Number : I20000000146
Phone : (305) 444-4994
Fax Number : (305) 444-4977

2009 JUL -6 P 1:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

FLORIDA PROFIT/NON PROFIT CORPORATION

WOMB'S VIEW CENTER FOR PRENATAL & POSTPARTUM WOMEN INC.

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$78.75

RECEIVED
SECRETARY OF STATE
05 JUL -6 PM 1:07

Electronic Filing Menu

Corporate Filing Menu

Help

60-1-7
2009

(((H09000157618)))

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:

WOMB'S VIEW CENTER FOR PRENATAL & POSTPARTUM WOMEN INC.

ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:

19751 SW 84 AVE.
MIAMI, FL 33189

ARTICLE III PURPOSE

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

ARTICLE IV SHARES

The number of shares of stock is:
SHARES: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):
BRIGITTA CUADROS (P/D)
HEIDI AGOSTINHO (V/D)
19751 SW 84 AVE. MIAMI, FL 33189

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:
HEIDI AGOSTINHO
19751 SW 84 AVE.
MIAMI, FL 33189

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:
HEIDI AGOSTINHO & BRIGITTA CUADROS
19751 SW 84 AVE.
MIAMI, FL 33189

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

Heidi Agostinho
Signature/Registered Agent
Heidi Agostinho
Signature/Incorporator

07-06-09

Date

07-06-09

Date

FILED
2009 JUL -6 P 1:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA