

Div of Corporations
Pg 1 of 1
P09000068437

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.

((H09000181423 3)))



H09000181423ABC

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 : (850) 617-6381

From:
Account Name : FASTKIT CORPORATE OUTFITS
Account Number : 071001002335
Phone : (305) 599-0839
Fax Number : (305) 716-0346

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2009 AUG 13 A 9:54

FILED

FLORIDA PROFIT/NON PROFIT CORPORATION

HEMODIALYSIS SERVICES, INC

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$78.75

RECEIVED
DEPARTMENT OF STATE
09 AUG 13 PM 1:06

Electronic Filing Menu

Corporate Filing Menu

Help

60-41-09

**ARTICLES OF INCORPORATION
OF**

HEMODIALYSIS SERVICES, INC

The undersigned, being of legal age and a natural person, do hereby subscribe to, acknowledge and file the following Articles of Incorporation for the purpose of creating a corporation under the law of State of Florida.

ARTICLE I - NAME

The name of the corporation shall be:

HEMODIALYSIS SERVICES, INC

ARTICLE II - PRINCIPAL OFFICE

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

**17125 NORTH BAY RD APT 3411
NORTH MIAMI BEACH FL 33160.**

ARTICLE III - DURATION

This corporation shall commence its existence immediately upon the filing of these Articles of Incorporation and shall exist perpetually thereafter unless sooner dissolved according to law.

ARTICLE IV - PURPOSE

The corporation may engage in or transact any or all lawful activities or business permitted under the laws of the United States, the State of Florida.

FILED
2009 AUG 13 A 9:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE V - AUTHORIZED SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

1000 shares at \$ 1.00 (one dollar) each

ARTICLE VI - INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial office of this Corporation and Florida Street address of the initial registered agent is:

**17125 NORTH BAY RD APT 3411
NORTH MIAMI BEACH FL 33160.**

ARTICLE VII - INITIAL BOARD OF DIRECTOR

This Corporation shall have one director initially. The number of directors may be either increased or diminished from time to time by the By-Law but shall never be less than one. The name and address of the initial directors of this Corporation is:

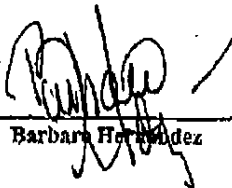
**BARBARO HERNANDEZ (President)
17125 NORTH BAY RD APT 3411
NORTH MIAMI BEACH FL 33160.**

ARTICLES VIII - INCORPORATOR

The name and street address of the incorporator to these articles of incorporation is:

**BARBARO HERNANDEZ
17125 NORTH BAY RD APT 3411
NORTH MIAMI BEACH FL 33160.**

The undersigned incorporator has executed these Articles of Incorporation this
12TH Day of August 2009.

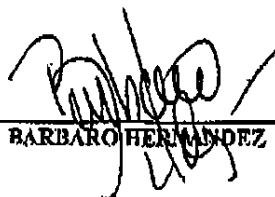


Barbara Hernandez

ARTICLE IX - POWERS OF CORPORATION

The Corporation shall have the same powers as an individual to do all things necessary or convenient to carry out its business and affairs, subject to any limitations or restrictions imposed by applicable law or these Articles of Incorporation.

IN WITNESS WHEREOF, I, the undersigned, being the Incorporator hereinbefore named, for the purpose of forming a corporation to do business both within and outside the State of Florida, under the laws of Florida, make and file these Articles of Incorporation, hereby declaring and certifying that the facts herein stated are true, and hereunto sign my name on this. 12TH Day of August 2009.



BARBARO HERNANDEZ

FILED
2009 AUG 13 A 9 55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES,
THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE
STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN
DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE
STATE OF FLORIDA.

1. The name of the corporation is: **HEMODIALYSIS SERVICES, INC**
2. The name and address of the registered agent and office is:

BARBARO HERNANDEZ
(Name)

17125 NORTH BAY RD APT 3411
(Address)

NORTH MIAMI BEACH, 33160
(City/State/Zip)

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent 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.


(Signature)

08/12/09
(Date)

DIVISION OF CORPORATIONS, PO BOX 6327, TALLAHASSEE, FL 32314.