

PO9000086194

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

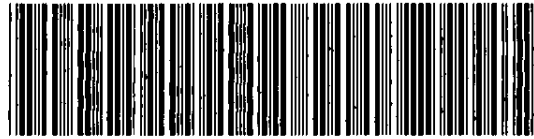
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600161693066

10/19/09--01013--007 **87.50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

09 OCT 19 PM 1:19

APPROVED
AND
FILED

VH

COVER LETTER

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

SUBJECT: MAYAN MED. INSTITUTE, INC.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☒ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: JUAN J. GARCIA
Name (Printed or typed)

5061 WALKER AVENUE
Address

WEST MELBOURNE, FL 32904
City, State & Zip

321-212.9190
Daytime Telephone number

juanjgarcia05@hotmail.com
E-mail address: (to be used for future annual report notification)

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

APPROVED
AND
FILED

09 OCT 19 PM 1:19

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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 **MAYAN MED. INSTITUTE, INC.**

ARTICLE II PRINCIPAL OFFICE

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

5061 WALKER AVENUE
WEST MELBOURNE, FL 32904

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

MEDICAL EDUCATION

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):

JUAN J. GARCIA -PRESIDENT
NELSON DIAZ SUAREZ - VICE PRESIDENT
ISABEL BUCK - SECRETARY

ARTICLE VI REGISTERED AGENT

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

NELSON DIAZ SUAREZ
5061 WALKER AVENUE
WEST MELBOURNE, FL 32904

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

JUAN J. GARCIA
5061 WALKER AVENUE
WEST MELBOURNE, FL 32904

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

Signature/Registered Agent

Signature/Incorporator

10/16/2009

Date

10/16/2009

Date