

P10000008608

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

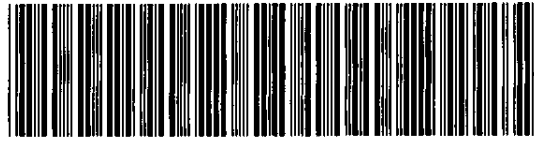
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10 JAN 28 AM 11:28
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2010 JAN 29 A 9:27
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D.A. WHITE
JAN 29 2010

LAZARUS

CORPORATE FILING SERVICE

3320 SW 87TH AVENUE

MIAMI, FL 33165 (305) 552-5973

Office Use Only

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

1. MT Health Care INC
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

- Walk in Pick up time 2.06 Certified Copy
 Mail out Will wait Photocopy Certificate of Status

NEW FILINGS

- Profit
 Not for Profit
 Limited Liability
 Domestication
 Other

AMENDMENTS

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

OTHER FILINGS

- Annual Report
 Fictitious Name

REGISTRATION/QUALIFICATION

- Foreign
 Limited Partnership
 Reinstatement
 Trademark
 Other

Examiner's Initials

ARTICLES OF INCORPORATION

IN ACCORDANCE WITH chapter 607 and/or Chapter 621, F.S. (Profit)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

THE NAME OF THE CORPORATION SHALL IS:

MT HEALTH CARE INC

ARTICLE II PRINCIPAL OFFICE

THE PRINCIPAL PLACE OF BUSINESS / MAILING ADDRESS IS:

**5135 N W 4 TERR.
MIAMI, FLORIDA 33126**

ARTICLE III PURPOSE

THE PURPOSE FOR WHICH THE CORPORATION IS ORGNIZED IS:

**THIS CORPORATION MAY ENGAGE IN ANY AND LAWFUL
BUSINESS IN THE INDUSTRY PERMITTED UNDER THE LAWS
OF THE USA, THE STATE OF FL. OR ANY OTHER STATE,**

ARTICLE IV SHARES

THE NUMBERS OF SHARES OF STOCKS IS:

100 – SHARES \$ 10.00 PAR VALUE

ARTICLE V INITIAL OFFICERS / DIRECTORS

THE NAME (S) AND ADDRESS (ES):

**MILKA TORRES (P. D.)
5135 N W 4 TERR
MIAMI, FLORIDA 33126**

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2010 JAN 28 A 9:27

ARTICLE VI REGISTERED AGENT

The name and Florida Street address of the registered agent is: SECRETARY OF STATE
TALLAHASSEE, FLORIDA

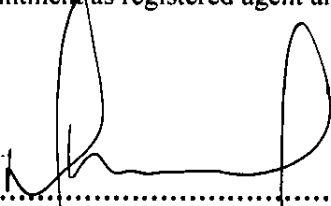
**MILKA TORRES
5135 N W 4 TERR
MIAMI, FLORIDA 33126**

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

**MILKA TORRES
5135 N W 4 TERR
MIAMI, FLORIDA 33126**


.....
Having been named as registered agent to accept services 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

.....1-27-2010.....

Date



.....
Signature/Incorporator

.....1-27-2010.....

Date