

# PH1000035195

## Florida Department of State Division of Corporations Electronic Filing Cover Sheet

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### FLORIDA PROFIT/NON PROFIT CORPORATION CMA HEALTHCARE SOLUTIONS, CORP

Certificate of Status	0
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**ARTICLES OF INCORPORATION**

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

The undersigned Incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

**ARTICLE I - NAME**

The name of the corporation shall be:

CMA HEALTHCARE SOLUTIONS, Corp

**ARTICLE II - PRINCIPAL OFFICE**

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

20163 NW 78 CT  
Miami FL 33015

**ARTICLE III - SHARES**

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

100

**ARTICLES IV - INITIAL REGISTERED AGENT AND STREET ADDRESS**

The name and address of the initial registered agent is:

Yulianela MARTINEZ  
20163 NW 78 CT  
Miami FL 33015

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**ARTICLE V - INCORPORATOR**

The name and address of the incorporator to these Articles of Incorporation is:

Yulianela MARTINEZ  
20163 NW 78 CT  
Miami FL 33015

The undersigned incorporator has executed these Articles of Incorporation this

8 day of April 2011.

  
\_\_\_\_\_  
Signature

**ARTICLE VI - DIRECTOR (S)**

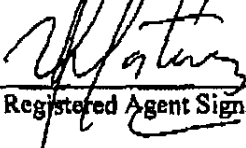
The name(s) and street address (es) of the director(s) to these Articles of Incorporation is (are):

Yulianela MARTINEZ (P)  
Odalis AGUILERA (T)

**CERTIFICATE OF DESIGNATION OF REGISTERED AGENT**

**/REGISTERED OFFICE**

Having been named as Registered Agent and to accept service of process for the above stated corporation at 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 related to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as Registered Agent.

  
\_\_\_\_\_  
Registered Agent Signature

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