

P11000078352

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

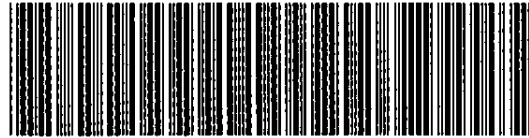
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300211661753

09/02/11--01019--007 **78.75

EFFECTIVE DATE

9-1-11

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
11 SEP -2 PM 1:15

Ps 9/6/11

Original

COVER LETTER

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

SUBJECT: Rainbow Medical Consulting, 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 Filing Fee
☒ \$78.75 Filing Fee
& Certificate of Status

☐ \$78.75 Filing Fee
& Certified Copy
☐ \$87.50 Filing Fee,
Certified Copy
& Certificate of
Status
ADDITIONAL COPY REQUIRED

FROM: Rainbow Medical Consulting, Inc.

Name (Printed or typed)

1401 SW 107 AVE, SUITE # 301-C

Address

MIAMI, FL 33174

City, State & Zip

305-321-3776

Daytime Telephone number

RAINBOWCONSULTING@LIVE.COM

E-mail address: (to be used for future annual report notification)

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

11 SEP -2 PM 1:15

ARTICLES OF INCORPORATION
Of
RAINBOW MEDICAL CONSULTING, INC.
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I
NAME

The name of the corporation shall be: Rainbow Medical Consulting, Inc. ("Company")

ARTICLE II
PRINCIPAL OFFICE

1401 SW 107 Ave
Suite# 301-C
Miami, FL 33174

EFFECTIVE DATE 9-1-11

ARTICLE III
PURPOSE

The purposes for which the corporation is organized are to engage in any activity or business not in conflict with the laws of the State of Florida or of the United States of America. The period of existence of the corporation shall be perpetual.

ARTICLE IV
SHARES & SHAREHOLDER DISBURSEMENT

The number of shares of stock is 1,000

The owners of the Company shall disburse the shares of the Company as follows:

Name	Total Number of Shares	Disbursement of Shares
Nelson Bello	900 Shares	90%
Arthur Jason Gonzalez	100 Shares	10%

ARTICLE V
INITIAL OFFICERS AND/OR DIRECTORS

Name: Nelson Bello
Title: President
Address: 1401 SW 107 Ave, Suite# 301-C, Miami, FL 33174

Name: Arthur Jason Gonzalez
Title: Vice President
Address: 801 Meridian Ave, Unit 1-D, Miami Beach, FL 33139

ARTICLE VI
REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:
Name: Arthur Jason Gonzalez
Address: 801 Meridian Ave, Unit 1-D, Miami Beach, FL 33139

Initials: NB AG

11 SEP -2 PM 1:15

**ARTICLE VII
INCORPORATOR**

The name and address of the Incorporator is:

Name: Arthur Jason Gonzalez
Address: 801 Meridian Ave, Unit 1-D, Miami Beach, FL 33139

**ARTICLE VII
ACCEPTANCE OF NEW OWNERS (TRANSFERABILITY OF INTEREST)**

No additional owners shall be accepted without the unanimous written consent of all owners of the Company. This rule will be applicable to any sale or transfer of shares.

**ARTICLE VIII
TERMINATION OF EXISTENCE (CONTINUITY OF LIFE)**

The company shall not be dissolved upon death, retirement, resignation, expulsion, bankruptcy, or dissolution of an owner, or upon the occurrence of any other event that terminates continued ownership of an owner of the Company.

**ARTICLE VIII
EFFECTIVE DATE**

Effective date of incorporation shall be made for the date of September 1, 2011.

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

Required Signature: _____

Registered Agent Date: 8/28/2011

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.115, F.S.

Required Signature: _____

Incorporator Date: 8/28/2011

Initials: NTB AG

IN WITNESS WHEREOF, the undersigned organizers have made and subscribed these Articles of Incorporation of RAINBOW MEDICAL CONSULTING, INC. for the foregoing uses and purposes this 28 day of August, 2011.

A.G. / NS

Nelson Bello
President

Arthur J. Gonzalez
Vice President

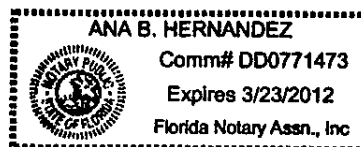
STATE OF FLORIDA)
) SS:
COUNTY OF MIAMI-DADE)

The foregoing instrument was acknowledged before me this 28th day of Aug. 2011, by **Nelson Bello**, who is personally known to me or who has produced Fl. Driver License identification.

Ana B. Hernandez
NOTARY PUBLIC

PRINT: Ana B. Hernandez

MY COMMISSION EXPIRES:



FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
11 SEP - 2 PM 1:15

Initials: NS AG

11 SEP - 2 PM 1:15

IN WITNESS WHEREOF, the undersigned organizers have made and subscribed these Articles of Incorporation of RAINBOW MEDICAL CONSULTING, INC. for the foregoing uses and purposes this 28 day of: August, 2011.

AG. / NRS

AB/10
Nelson Bello
President

[Signature]
Arthur J. Gonzalez
Vice President

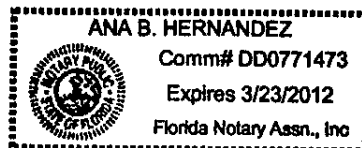
STATE OF FLORIDA)
) SS:
COUNTY OF MIAMI-DADE)

The foregoing instrument was acknowledged before me this 28th day of Aug., 2011, by **Arthur J. Gonzalez**, who is personally known to me or who has produced Fl. Driver License identification.

[Signature]
NOTARY PUBLIC

PRINT: Ana B. Hernandez

MY COMMISSION EXPIRES:



Initials: NB AG