

P11000085011

#3902 P.001/003

Florida Department of State
Division of Corporations
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.

((H11000236522 3)))



H110002365223ABCW

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 : LAZARUS CORPORATE FILING SERVICE, INC.
Account Number : I20000000019
Phone : (305) 552-5973
Fax Number : (305) 220-1440

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

FLORIDA PROFIT/NON PROFIT CORPORATION
MARBELLA MEDICAL CARE, INC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

Electronic Filing Menu

Corporate Filing Menu

Help

RECEIVED

11 SEP 28 PM 2:38

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

11 SEP 28 AM 8:46

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

9/29
JB

H 1 1 0 0 0 2 3 6 5 2 2

ARTICLES OF INCORPORATION

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:

Marbella Medical Care, INC

ARTICLE II - PRINCIPAL OFFICE

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

1901 NW 7 St Suite 108
Miami FL 33125

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:

EDUARDO SOTOLONGO
1619 SW 17 Terr
Miami FL 33145

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

11 SEP 28 AM 8:46

H 1 1 0 0 0 2 3 6 5 2 2

H 1 1 0 0 0 2 3 6 5 2 2

ARTICLE V - INCORPORATOR

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

EDUARDO SOTOLONGO
1619 SW 17 Terr. Suite 108
Miami, FL 33125

The undersigned incorporator has executed these Articles of Incorporation this

28 day of September 20 11.


Signature

ARTICLE VI- DIRECTOR (S)

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

EDUARDO SOTOLONGO (P)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

11 SEP 28 AM 8:46

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

H 1 1 0 0 0 2 3 6 5 2 2