

P12000020560

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

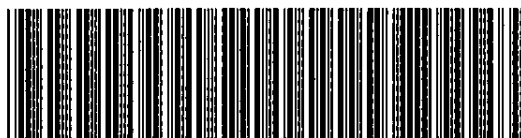
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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
12 FEB 29 PM 2:19

3/1/12

## COVER LETTER

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

SUBJECT: MedicPro Services 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: Melissa Solorzano  
Name (Printed or typed)  
4000 SW 112 Ave  
Address  
miami, FL 33165  
City, State & Zip  
305 205 8997  
Daytime Telephone number  
medic.pro12@yahoo.com  
E-mail address: (to be used for future annual report notification)

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
12 FEB 29 PM 2:19

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

RECEIVED

12 FEB 29 AM 11:25

DIVISION OF CORPORATIONS

January 10, 2012

MELISSA SOLORZANO  
4000 SW 112 AVENUE  
MIAMI, FL 33165

SUBJECT: MEDIC PRO SERVICES, INC.  
Ref. Number: W12000001594

We have received your document for MEDIC PRO SERVICES, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

You have indicated in your document the ownership and percentages of the authorized shares. Please note this information is not required nor is it maintained by the Department of State. While we cannot require such, it is recommended that it be removed from the document. The only information needed for this filing is the number of authorized shares.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6973.

Claretha Golden  
Regulatory Specialist II  
New Filing Section

Letter Number: 312A00000623

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
12 FEB 29 PM 2:19

**ARTICLE I NAME**

The name of the corporation shall be: MedicPro Services, Inc.

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

**ARTICLE II PRINCIPAL OFFICE**

Principal street address  
8851 NW 119 St #6216  
Hialeah Gardens, FL 33018

Mailing address, if different 12 FEB 29 PM 2:19

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:  
Medical consulting company

**ARTICLE IV SHARES**

The number of shares of stock is: 100

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Melissa Solorzano (President)  
Address: 8851 NW 119 St #6216  
Hialeah Gardens, FL 33018

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
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Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

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

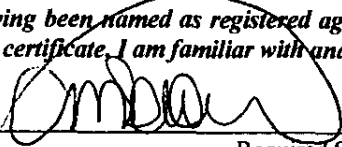
Name: Melissa Solorzano  
Address: 8851 NW 119 St #6216  
Hialeah Gardens, FL 33018

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Melissa Solorzan  
Address: 8851 NW 119 St. # 6216  
Hialeah Gardens, FL 33018

*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*

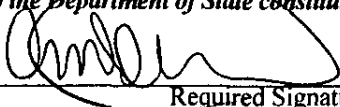


Required Signature/Registered Agent

02/11/2012

Date

*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.817.155, F.S.*



Required Signature/Incorporator

02/11/2012

Date