

Division of Corporations **Electronic Filing Cover Sheet**

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FLORIDA PROFIT/NON PROFIT CORPORATION DORAL HEALTH CARE CENTER CORP

| Certificate of Status | 0 |
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4/27/2012

#5650 P: 002/003 SECRETARY OF STATE DIVISION OF CORPORATIONS

12 APR 27 AM 11: 15

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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:

Donal HEALTH CARE CENTER Corp

ARTICLE II - PRINCIPAL OFFICE

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

7884 NW, 52 ST Doraf, FL, 33/66.

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:

Darly Lopez -7884 NW 52 ST DORAL FL 33166

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ARTICLE V - INCORPORATOR

| The | name and | address of t | he incorporato | r to these A | Articles of | incorporation is: |
|-----|----------|--------------|----------------|--------------|-------------|-------------------|
| | | | | | | |

Saily Lopez
7884 NW 52 ST.

The undersigned incorporator has executed these Articles of Incorporation this 27 day of Pril 20 12.

ARTICLE VI- DIRECTOR (S)

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

Saily Lopez (P)

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 Signatur

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