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8

## COVER LETTER

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

SUBJECT: **A & H MEDICAL CENTER, 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: **Yisset Abreu**

Name (Printed or typed)

**9370 S.W. 72 STREET # A 103**

Address

**Miami, Florida 33173**

City, State & Zip

**786-442-4615**

Daytime Telephone number

**a.yisset@yahoo.com**

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

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

**ARTICLES OF INCORPORATION**  
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

**ARTICLE I    NAME**

The name of the corporation shall be:

**A & H MEDICAL CENTER INC.**

**ARTICLE II    PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

**9370 S.W. 72 STREET**

**SAME**

**SUITE A 103**

**MIAMI, FLORIDA 33173**

**ARTICLE III    PURPOSE**

The purpose for which the corporation is organized is:

**A LAWFUL HEALTHCARE CENTER**

**ARTICLE IV    SHARES**

The number of shares of stock is:

**100**

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

Name and Title:

**YISSET ABREU    P**

Name and Title:

**YENHEIT HURTADO    VP**

Address

**9370 S.W. 72 STREET #A103**

Address:

**9370 S.W. 72 STREET #A103**

**MIAMI, FLORIDA 33173**

**MIAMI, FLORIDA 33173**

Name and Title:

Name and Title:

Address

Address:

Name and Title:

Name and Title:

Address

Address:

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TALLAHASSEE FLORIDA

(conti.)

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

Address \_\_\_\_\_ Address: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

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

Name: YISSET ABREU

Address: 9370 S.W. 72 STREET #A 103

MIAMI, FLORIDA 33173

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

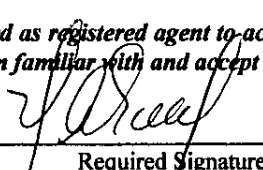
Name: YISSET ABREU

Address: 9370 S.W. 72 STREET #A 103

MIAMI, FLORIDA 33173

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*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

01/14/2013

\_\_\_\_\_  
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

01/14/2013

\_\_\_\_\_  
Date