Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

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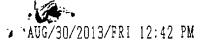
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FLORIDA PROFIT/NON PROFIT CORPORATION NATIONAL MEDICAL INSTITUTE CORP.

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$78.75



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

	NAME poration shall be: National Medical Instit	ute Corp.	
	PRINCIPAL OFFICE Principal street address 4160 West 16 Ave Sulte #210 Haleah ,FI 33012	<u>¥</u>	ailing address, if different is:
ARTICLE III I	PURPOSE ich the corporation is organized is: Any and	all lawful bus	iness
ARTICLE IV STARTS	s of stock is: 100 INITIAL OFFICERS AND OR DIRECTOR	s	
Name and Tit	le: Juan Francisco Perez (President	Name and Title:	
Address:	823 West 83 Tem Hialeah Fl 33012		600 NW 32 Place
•	<u> </u>		Suite #215
Name and Titl	_{le;} Yanepsy Santos (Treasurer)	Name and Title:	Miami ,Fl 33125
Address:	600 Nw 32 Place Suite #215	Address:	
	Miami Fl 33125	-	
Name and Titl Address:	lė:	Name and Title:	
ARTICLE VI I The name and Flor Name: Address:	REGISTERED AGENT Ida street address (P.O. Box NOT acceptable) of Juan Francisco Perez 823 West 83 Terr., Hialeah "Fl		13 AUG 30 SECTETAR ALLAHASS
			6.25mm = 10 10 10 10 10 10 10 10 10 10 10 10 10
	TACORPORATOR Test of the Incorporator is:		
Name:	Juan Francisco Perez		
Address:	823 West 83 Terr., Hialeah,Fl 3	3012	RID RID
	l as registered agant to accept service of process familiar with and accept the appointment as reg		
Juan St ancisce	Pares .		08/30/2013
	Required Signature/Registered Agent		Date
	ent and affirm that the facts stated herein are to partment of State constitutes a third degree felony		
Juan Francisco	Para .		08/30/2013
 	Required Signature/Incomerator		Date