# ment of State

the fax audit number (show

print this page and use it as a cover sh below) on the top and bottom of all pages of the document.

(((H130002332373)))



H130002332373ABCY

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 : 120000000019

: (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:

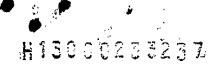
### FLORIDA PROFIT/NON PROFIT CORPORATION AJNA MEDICAL CENTER CORP.

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

Electronic Filing Menu

Corporate Filing Menu

Help





#### 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:

AJNA Médical Center CORP.

### ARTICLE II - PRINCIPAL OFFICE

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

8356 SW 40 ST suite L Mianui FC 33/55

### <u>ARTICLE III – SHARES</u>

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:

CARLOS A. AitA 8356 Son 40 st serite L plianni FL 33155

### H13000233237

#### ARTICLE V - INCORPORATOR

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

ARLOS A AITA

8356 SW 40 ST. Suite L Miami FL 33155

The undersigned incorporator has executed these Articles of Incorporation this

215 day of 2000 = 20\_\_\_\_\_.

### ARTICLE VI- DIRECTOR (S)

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

CARLOS A. AITA (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 Signature