Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H140000557173)))



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 : I2000000019 Phone : (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

SERENITY MEDICAL SERVICES CORP

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

Corporate Filing Menu

Help

Electronic Filing Menu

#0087 P, 002/004 _.

Fax Server



March 7, 2014

FLORIDA DEPARTMENT OF STATE

LAZARUS CORPORATE FILING SERVICE, Division of Corporations

SUBJECT: SERENITY MEDICAL SERVICES CORP

REF: W14000014924

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

If you have any further questions concerning your document, please call (850) 245-6052.

Thomas Chang Regulatory Specialist II New Filing Section FAX Aud. #: #14000055717 Letter Number: 014A00005070 EXCELLENT HEALTH SERVICES

#0087 P.003/004 No. 4938 188 P. 3/5/003

H14000055717 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

Shewith Medical Services

Corp

ARTICLE II - PRINCIPAL OFFICE

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

MIAMI, FL 33/35

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:

(MR/DS X/DERTB XIAR/NEW DITALLE)

1/28 West 51 flace

Healeah, Fl. 33012

EXCELLENT HEALTH SERVICES

#0087 P.004/004 No. 4938, 188^P. 2/5/003

H\$4000055717

ARTICLE V - INCORPORATOR

| OBRIOS HIBERTO LARMENDATA | |
|---|--|
| OPRIOS PIBERTO SARMENDAM 1128 West 51 PLACE | |
| Healeah, Fl 330/2 | |
| The undersigned incorporator has executed these Articles of Incorporation this day of 20/4. | |
| Signature | |
| ARTICLE VI- DIRECTOR (S) | |
| The name(s) and street address (es) of the director(s) to these Articles of | |
| Incorporation is (are): | |
| MRIOS ALBERTO XARMENDIA | |
| 1128 West 51 Phace MESE | |
| Healeah, FL. 33012 | |
| | |
| ORD II | |
| CERTIFICATE OF DESIGNATION OF REGISTERED AGENT | |
| : /REGISTERED OFFICE | |
| Having been named as Registered Agent and to accept service of process for the above stated | |
| Thomping a second and the second second second second and Day Land | |

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 duries, and I am familiar with and accept the obligations of my position as Registered Agent.

Registered Agent Signature

H14000055717