

H15000053950301

Florida Department of State
Division of Corporations
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FLORIDA PROFIT/NON PROFIT CORPORATION
BEST WELLCARE INC

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

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S. GILBERT

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

ARTICLE I NAME: The name of the corporation is:

Best Wellcare Inc.

ARTICLE II PRINCIPAL OFFICE:

The principal street address and mailing address is:

3900 NW 79 Ave

Suite # 582

Miami, FL 33166

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ARTICLE III SHARES: The number of shares of stock is: 100

ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:

Yoanis Garcia Ramos (P)

ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:

The name and Florida street address (PO Box not acceptable) of the registered agent is:

Yoanis Garcia Ramos

3900 NW 79 Ave

Suite 582 Miami FL 33166

ARTICLE VI INCORPORATOR: The name and address of the Incorporator is:

Yoanis Garcia Ramos

3900 NW 79 Ave Suite 582


Miami FL 33166

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Required Signatures:

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



 Registered Agent: 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.



 Incorporator: Date

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