

P16000016431

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:
Division of Corporations
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FLORIDA PROFIT/NON PROFIT CORPORATION
MIAMI MEDICAL ASSOCIATES USA, INC

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

FEB 2 2 2016

T. SCOTT

16 FEB 19 PM 12:11

16 FEB 19 PM 4:05

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

H16000043446

ARTICLE I NAME: The name of the corporation is:

Miami Medical Associates USA, Inc

ARTICLE II PRINCIPAL OFFICE:

The principal street address and mailing address is:

1137 SW 143 PL
Miami FL 33184

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

ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:

Reinier Padron (P)

16 FEB 19 PM 12: 11

ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:

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

Reinier Padron
1137 SW 143 PL
Miami FL 33184

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

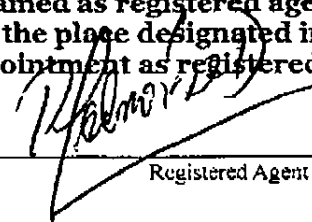
Reinier Padron
1137 SW 143 PL
Miam FL 33184

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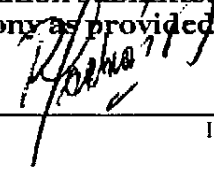
Required Signatures:

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

x  _____

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.

x  _____

Incorporator Date

H16000043447