

P/6000050506

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16 JUN -6 PM 2:58

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STATE
CLERK

06/09/16

BMO Healthcare Services, Inc.
1175 NE 136th Street North Miami, FL 33161 (813)361-7265

Department of State
New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314


May 27, 2016

Subject: Release of Corporate Name

This is to certify that I am the President of BMO Healthcare Services, Inc., listed under document No: P14000098668, and registered by me with the State of Florida Department of Corporations. I have decided effective immediately to release the name and make it available to be used as a corporation name by the general public.

I also affirm that I will not attempt to reinstate the name or hold anyone liable for using the name in the future.

Sincerely,


Bridget Shodeinde
President

45 JUN -9 PM 2:58
BMO HEALTHCARE SERVICES, INC.
P14000098668

COVER LETTER

Department of State
New Filing Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

SUBJECT: BMO Healthcare Services, Inc.

(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☒ \$70.00
Filing Fee

☐ \$78.75
Filing Fee
& Certificate of Status

☐ \$78.75
Filing Fee
& Certified Copy

☐ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: Bridget Shodehinde

Name (Printed or typed)

1175 NE 136th Street

Address

North Miami, FL 33161

City, State & Zip

813-361-7265

Daytime Telephone number

al_mayungbe@yahoo.com

E-mail address: (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the articles.

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CLERK OF DISTRICT COURT
16 JUN -5 PM 2:58
MIAMI, FL

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be: BMO Healthcare Services, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

1175 NE 136th Street

Same

North Miami, FL 33161

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Any and all Lawful Business

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Bridget Shodehinde - President

Name and Title: _____

Address 1175 NE 136th Street

Address: _____

North Miami, FL 33161

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____
Address _____ Address: _____

ARTICLE VI REGISTERED AGENT

The **name and Florida street address** (P.O. Box NOT acceptable) of the registered agent is:

Name: Albert A Mayungbe, CPA
Address: 111 NW 183rd Street, Suite 402
Miami, FL 33169

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2016 MAY 27 AM 10:58
CLERK OF THE COURT
16 MAY -6 PM 2:58

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: Bridget Shodehinde
Address: 1175 NE 136th Street
North Miami, FL 33161

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 05/27/2016 (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

Required Signature/Registered Agent
05/27/2016
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.

Required Signature/Incorporator
05/27/2016
Date