

06/15/2016 14:15

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LAZARUS

AGE 01/03

# P1600051475

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

**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.**

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To:

Division of Corporations  
Fax Number : (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.  
Account Number : I20000000019  
Phone : (305)552-5973  
Fax Number : (305)675-5944

2016 JUN 15 AM 10:52  
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**\*\*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  
MLKC-MERCY, INC.**

RECEIVED

16 JUN 15 PM 4:24

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

## 2ND REQUEST

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Corporate Filing Menu

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JUN 16 2016

T 00:00:00

**ARTICLES OF INCORPORATION**  
In compliance with Chapter 607 and/or Chapter 624, F.S. (Profit)

H16000144805

**ARTICLE I NAME:** The name of the corporation is:

MLKC-Mercy, Inc.

**ARTICLE II PRINCIPAL OFFICE:**

The principal street address and mailing address is:

3237 SW 4th apt 4  
Miami FL 33135

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

1000

**ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:**

MERCEDES INES MARTINEZ (P)

**ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:**

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

Mercedes Ines Martinez  
3237 SW 4th Apt 4  
Miami FL 33135

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

Mercedes Ines Martinez  
3237 SW 4th Apt 4  
Miami FL 33135

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05/15/2016 14:35

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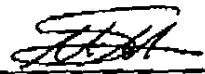
**Required Signatures:**

**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

H16000144805