

P16000252869

Florida Department of State
Division of Corporations
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**FLORIDA PROFIT/NON PROFIT CORPORATION
DMR MOBILITY & HEALTH CORP.**

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

J. FASON
OCT 12 2016

16 OCT 12 PM 4:41
RECEIVED
DIVISION OF CORPORATIONS
STATE OF FLORIDA

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

ARTICLE I NAME

The name of the corporation shall be: DMR MOBILITY & HEALTH CORP.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

5802 Bird Road

South Miami, Florida 33155

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: to conduct any and all legal business transactions.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: ANGEL NELLO PARDO

Name and Title: ANGEL NELLO PARDO

Address: 5802 BIRD ROAD
SOUTH MIAMI, FLORIDA 33155
PRESIDENTAddress: 5802 BIRD ROAD
SOUTH MIAMI, FLORIDA 33155
SECRETARY

Name and Title:

Name and Title:

Address:

Address:

Name and Title:

Name and Title:

Address:

Address:

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

ARTICLE VI REGISTERED AGENTThe name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: ANGEL NELLO PARDO
Address: 5802 BIRD ROAD
SOUTH MIAMI, FLORIDA 33155

ARTICLE VII INCORPORATORThe name and address of the incorporator is:

Name: ANGEL NELLO PARDO
Address: 5802 BIRD ROAD
SOUTH MIAMI, FLORIDA 33155

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (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

10/12/2016

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.817.135, F.S.

Required Signature/Incorporator

12/12/2016

Date

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