Division of Corporations Electronic Filing Cover Sheet

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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

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FLORIDA PROFIT/NON PROFIT CORPORATION Y&D MEDICAL CENTER INC.

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

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ARTICLES OF INCORPORATION In compliance with Chapter 607 (Profit)

ARTICLE I NAME: The name of the corporation is:
UBD Medical Center luc.
ARTICLE II PRINCIPAL OFFICE:
The principal street address and mailing address is:
15527 SW 18th St
- Windi H 33185
ARTICLE HI SHARES: The number of shares of stock is: \OO
ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:
Yinet Gonzalez (P)
Dianelys Maurelles Cabrera (VP)
ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:
The name and Florida street address (PO Box not acceptable) of the registered agent i
<u> Yinet Gonzalez</u>
15527 SW 18Th ST
Miami . FL 33185 .
€
ARTICLE VI INCORPORATOR: The name and address of the Incorporator is
Yinet Gonzalez
15527 EW 18Th ST
Micmi FL 33185

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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

01 11 3017

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

17 JAN I I AM B: 46
SECTION OF STATE
ALL AHASSEE FLORIDA