

**Florida Department of State**  
**Division of Corporations**  
**Electronic Filing Cover Sheet**

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Division of Corporations  
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Email Address: \_\_\_\_\_

**FLORIDA PROFIT/NON PROFIT CORPORATION**  
**GM MEDICAL CARE CORP**

Certificate of Status	0
Certified Copy	1
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**ARTICLES OF INCORPORATION**

In compliance with Chapter 607 (Profit)

**ARTICLE I NAME:** The name of the corporation is:GM Medical care Corp**ARTICLE II PRINCIPAL OFFICE:**

The principal street address and mailing address is:

7201 SW 128 AveMiami FL33183**ARTICLE III SHARES:** The number of shares of stock is: 100**ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:**Ania Catalina Mora (P)Jorge Gonzalez (VP)**ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:**

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

Ania Catalina Mora7201 SW 128 AveMiami FL 33183**ARTICLE VI INCORPORATOR:** The name and address of the Incorporator is:Ania Catalina Mora7201 SW 128 AveMiami FL 33183FILED  
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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\_\_\_\_\_  
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