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From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : I20000000019 Phone : (305)552-5973 Fax Number : (305)675-5944

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## FLORIDA PROFIT/NON PROFIT CORPORATION PEREZ MEDICAL CENTER INC

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

Electronic Filing Menu

Corporate Filing Menu

Help

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## ARTICLES OF INCORPORATION In compliance with Chapter 607 (Profit)

ARTICLE I NAME: The name of the corporation is:

PEREZ Medical Center INC
ARTICLE II PRINCIPAL OFFICE:
The principal street address and mailing address is:
8080 WEST FLAGIER ST SUITE 3A
<u>HIGHI FLA 33144</u>
ARTICLE III SHARES: The number of shares of stock is:
ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:
Lion Maricel Penez (P)
*
ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:
The name and Florida street address (PO Box not acceptable) of the registered agent is:
LIDIA MARICEL PEREZ
8080 WEST FLAGIER ST SUITE 34
M19m, 74 33144
ARTICLE VI INCORPORATOR: The name and address of the Incorporator is:
LIDIA MARICEL PEREZ
8080 WEST FLAGIER ST SUITE SA
MIAMI FL 33144
u1700013385Q

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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