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Florida Department of State
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FLORIDA PROFIT/NON PROFIT CORPORATION

evelyn nieves, pa

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**ARTICLES OF INCORPORATION
PROFESSIONAL CORPORATION**

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

DATE: May 10, 2017

ARTICLE I - NAME

The name of the Professional Association is:

EVELYN NIEVES, PA

ARTICLE II - PRINCIPAL OFFICE ADDRESS:

The mailing address and street address of the principal office of the Professional Association is:

**15719 SW 54 CT
MIRAMAR, FL 33027**

ARTICLE III - PURPOSE:

The purpose for which the Professional Association is organized is: For the purpose of engaging in the Professional Services of a Physician.

ARTICLE IV - SHARES:

The number of shares initially authorized of stock is: **7,500**

(continued)

ARTICLE V - INITIAL OFFICER AND/OR DIRECTOR:

The name and Florida Street address of the Initial Officer is:

Name and Title:

EVELYN NIEVES, PRES

Address:

15719 SW 54 CT
MIRAMAR, FL 33027

ARTICLE VI - REGISTERED AGENT:

The name and Florida Street address of the registered agent is:

Name:

EVELYN NIEVES

Address:

15719 SW 54 CT
MIRAMAR, FL 33027

ARTICLE VII - INCORPORATOR

The name and address of the Incorporator is:

Name:

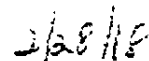
EVELYN NIEVES

Address:

15719 SW 54 CT
MIRAMAR, FL 33027



Incorporator Signature

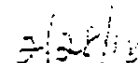


Date

Having been named as registered agent to accept service of process for the above stated Professional Association 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 Signature



Date

(continued)

ARTICLE VIII - EFFECTIVE DATE

The effective date of the Professional Association shall be: March 2, 2018.

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.



Officer/Director Signature

2/28/18

Date