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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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Division of Corporations
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**FLORIDA PROFIT/NON PROFIT CORPORATION
LEE COUNTY MEDICAL INSTITUTE CORP**

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

RECEIVED

2018 MAY 24 PM 2:29

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
COMMERCIAL
REGISTRATION SERVICES

2018 MAY 24 AM 10:54
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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Corporate Filing Menu

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MAY 25 2018

K. Brumbley

ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

H18000160261

ARTICLE I NAME: The name of the corporation is:LEE COUNTY MEDICAL INSTITUTE Corp.**ARTICLE II PRINCIPAL OFFICE:**

The principal street address and mailing address is:

4531 DELEON ST UNIT 215
FT MYERS FL 33907**ARTICLE III SHARES:** The number of shares of stock is: 100**ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:**LEIDIER FRANCEDA (P)2018 MAY 24 AM 10:54
SECRETARY OF STATE
TALLAHASSEE FLORIDA

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ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:

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

LEIDIER FRANCEDA
4531 DELEON ST UNIT 215
FT MYERS FL 33907**ARTICLE VI INCORPORATOR:** The name and address of the Incorporator is:LEIDIER FRANCEDA
4531 DELEON ST UNIT 215
FT MYERS FL 33907

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Required Signatures:

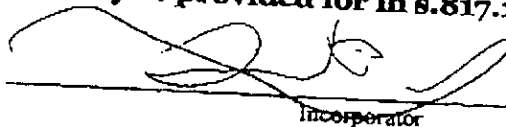
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



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 §.817.155, F.S.



Incorporator

Date

H18000160261