Electronic Filing Cover Sheet

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FLORIDA PROFIT/NON PROFIT CORPORATION ANNIE RODRIGUEZ O.D. P.A.

Certificate of Status	0
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Corporate Filing Menu

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

The name of the corpo	AME Dration shall be: Annie	Rodriguez (D.D. P.A.	
ARTICLE II P	RINCIPAL OFFICE Principal street address	Q		
5439 5	W 153rd Avenue No	Mailing a	address, if different is:	
Miami	FL 33185			
ARTICLE III PU The purpose for which	RPOSE n the corporation is organized is:	Detometric.	Services	
			—————————————————————————————————————	
The number of shares of ARTICLE V IN	TIAL OFFICERS AND/OR DIRECTOR	<u> </u>	FILED JUL 19 AM 9: CRETARY OF STA	
Name and Tit	5439 SW 153 rd	Name and Title:	<u> </u>	-
Address	Avenue Road	Address:		13
	Miami FL 3318	<u> </u>		
Name and Title	<u>:</u>	Name and Title:		
Address				
		-		
Norman I militar				
	:			
Address				
		·		

(contr.)

Name a	nd Title:Name and Title:
Addres	
ARTICLE VI	REGISTERED AGENT
The name and F	lorida street address (P.O. Box NOT acceptable) of the registered agent is:
Name:	Annie Rodriguez
Address:	5439 sw 153rd Avenue Road
	Miami FL 33185
ARTICLE VII	INCORPORATOR
The name and a	ddress of the Incorporator is:
Nате:	Annie Rodriguez
Address:	5439 SW 153 ^{fd} Avenue record Migmi FC 3318T
	Miami FC 3318T
Having been nan this certificate, I	ned as registered agent to accept service of process for the above stated corporation at the place designated in am familiar with and accept the appointment as registered agent and agree to act in this capacity
	Required Signature/Registered Agent Date Date
I submit this doc document to the l	ument and affirm that the facts stated herein are true. I am aware that the false information submitted in a Department of State copptitutes a third degree felony as provided for in s.817.155, F.S.
	Required Signature/Incorporator - 7 19 18

SECKLIANT OF SIEL AGIROALE LECORIDA.

18 10F 19 4H 9: 24

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