Electronic Filing Cover Sheet

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Division of Corporations

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From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : 120000000019 Phone : (305)552-5973 Fax Number : (305)675-5944

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## FLORIDA PROFIT/NON PROFIT CORPORATION H. MIAMI MEDICAL CENTER INC

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

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Help

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

ARTICLE 1 NAME: The name of the corporation is:
H. MIAMI MEDICAL CENTER IA
MODICAL CENTER IN
ARTICLE II PRINCIPAL OFFICE:
The principal street address and mailing at
27-90 (1) Elisabet 11-11
MIAMI Florida 33/34
38/34
ARTICLE III SHARES. The number of the
ARTICLE III SHARES: The number of shares of stock is:
ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:
DANIU RIGIEL P. D. T. CO.
DANY RAFAEL RUIZ RIBALTA (P)
EN EN
<del>Q</del>
- CS
ARTICLE V INITIAL REGISTEDED ACCOUNTS
The name and Florida street address (PO Box not acceptable) of the registered agent is:
DANY ROFAEL During Draw agent is:
DANY RAFAEL RUIZ RIBALTA
3990 W. Flagler St. #205
MIAMI FL 33134
ARTICLE VI INCORPORATOR: The name and address of the Incorporator is:
DANY Ratael Ruiz Ribalta
3990 W. Flaaler St #205
MIAMI FL JASIBL

## 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

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.