Division of Corporations

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From:

Account Name : LEGALINC CORPORATE SERVICES INC.

Account Number : I20180000011 Phone : (844)386-0178 Fax Number : (214)317-4754

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# FLORIDA PROFIT/NON PROFIT CORPORATION LPM HEALTHCARE, INC.

Certificate of Status	0
Certified Copy	1
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## ARTICLES OF INCORPORATION OF

#### LPM HEALTHCARE, INC.

The undersigned hereby forms a Corporation under the following charter of Articles of incorporation:

#### ARTICLE I

The name of this Corporation shall be:

#### LPM HEALTHCARE, INC.

#### **ARTICLE II**

The principal place of business/mailing address is:

1001 10<sup>TH</sup> CT PALM BEACH GARDENS, FL 33410

#### **ARTICLE III**

This Corporation is organized for the purpose of transacting any or all-lawful business.

#### ARTICLE IV

The aggregate number of shares which the corporation has authority to issue is one-thousand (1,000) shares of common stock having a par value of \$1.00 each. The Corporation elects to have preemptive rights for its shareholders.

#### **ARTICLE V**

This Corporation shall have one (1) directors initially. The number of directors may be either increased or diminished from time to time by the By-Laws, but shall never be less than one (1). The names and addresses of the initial director(s) of this Corporation are:

BROCK PLEMEL 1001 10<sup>TH</sup> CT PALM BEACH GARDENS, FL 33410 To: 18506176381 From: 14694451465 Date: 02/12/19 Time: 10:58 AM Page: 03/04

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#### ARTICLE VI

The name and address of the initial registered agent of this corporation is:

BROCK PLEMEL 1001 10<sup>TH</sup> CT PALM BEACH GARDENS, FL 33410

#### **ARTICLE VII**

The name and address of the incorporator (s) of this corporation are:

BROCK PLEMEL 1001 10<sup>TH</sup> CT PALM BEACH GARDENS, FL 33410

#### ARTICLE VIII

The start date of the Incorporation will be:

February 12, 2019

BROCK PLEMEL /PRESIDENT

02/12/2019

DATE

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#### **CERTIFICATE OF DESIGNATION**

#### REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section 607.0501, Florida Statutes, the undersigned Corporation, organized under the laws of the state of Florida, submits in the state of Florida.

1. The name of the Corporation is:

#### LPM HEALTHCARE, INC.

The name and address of the registered agent and office is:

BROCK PLEMEL 1001 10<sup>TH</sup> CT PALM BEACH GARDENS, FL 33410

Having been named as registered agent and to accept service of process for the above stated Corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

BROCK PLEMEL
/PRESIDENT

02/12/2019

DATE

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