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	Division of Cor	porations	 ,	
	Fax Number	: (8 50)617-6381		19
From:			2	[]
	Account Name	: LAZARUS CORPORATE FILING SERVICE, INC.	J	
	Account Number		33	S
	Phone	: (305)552-5973		
	Fax Number	: (305)675-5944	11.5	
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**Ente	er the email addr	ess for this business entity to be used for futuilings. Enter only one email address please **	re	 نب
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FLORIDA PROFIT/NON PROFIT CORPORATION SRC HEALTH PROFESSIONAL CORP

Certificate of Status	
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ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

ARTICLE I NAME: The name of the corporation is

and marine of the corporation is:
SRC HEALTH PROFESSIONAL CORP
ARTICLE II PRINCIPAL OFFICE:
The principal street address and mailing address is:
13925 SW. 179th St
MIAMI, FL 33177
ARTICLE III SHARES: The number of shares of stock is:
ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:
SERGIO RODRIGUEZ CHAPLE (P)
<u> </u>
ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:
The name and Florida street address (PO Box not acceptable) of the registered agent is:
SERGIO RODRIGUEZ CHAPLE
13925 SW, 179th ST
MIAMI. FL 33177
ARTICLE VI INCORPORATOR: The name and address of the Incorporator is:
SERGIO RODRIGUEZ CHAPLE
13925. Sw. 179th ST
MIAMI. F1 33177

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

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.

Incorporator

Date