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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850)617-6381

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FLORIDA PROFIT/NON PROFIT CORPORATION ML HEALTH CENTERS CORP

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

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JUL 10 2019

ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

ARTICLE I NAME: The name of the corporation is:

ML HEALTH CENTERS CORP

ARTICLE II PRINCIPAL OFFICE:

The principal street address and mailing address is:

2613 N Miami Ave Miami FL 33127

ARTICLE III SHARES: The number of shares of stock is: 1000

ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:

David Quintana - President / Founder / CEO

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CLERK OF DISTRICT COURT
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MIAMI, FL

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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:

David Quintana

2613 N Miami Ave Miami FL 33127

ARTICLE VI INCORPORATOR: The name and address of the Incorporator is:

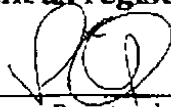
David Quintana

2613 N MIAMI AVE

MIAMI FL 33127

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

July 8th 2019

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 s.817.155, F.S.

_____
Incorporator

July 8th 2019

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