

P190000075786

Florida Department of State  
Division of Corporations  
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OCT-8 PM 3:03  
DIVISION OF CORPORATIONS

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Email Address: \_\_\_\_\_

**FLORIDA PROFIT/NON PROFIT CORPORATION  
LIFE FOR EVER MEDICAL AND REHAB CENTER INC**

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

**ARTICLES OF INCORPORATION**

In compliance with Chapter 607 (Profit)

**ARTICLE I NAME:** The name of the corporation is:LIFE FOR EVER MEDICAL AND REHAB CENTER**ARTICLE II PRINCIPAL OFFICE:** INC

The principal street address and mailing address is:

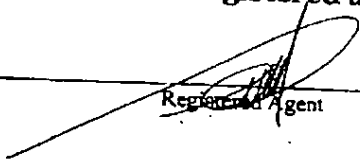
830 NW 127 ST NORTH MIAMI FL  
33168**ARTICLE III SHARES:** The number of shares of stock is: 100**ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:**OSCAR SERGIO PERIU (P)FILED  
IN THE OFFICE OF THE  
CLERK OF THE  
STATE OF FLORIDA  
15 OCT - 8 PM 3:03**ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:**

The name and Florida street address (PO Box not acceptable) of the registered agent is:

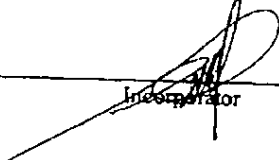
OSCAR SERGIO PERIU830 NW 127 STNORTH MIAMI FL 33168**ARTICLE VI INCORPORATOR:** The name and address of the Incorporator is:OSCAR SERGIO PERIU830 NW 127 STNORTH MIAMI FL 33168

**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      10/08/2019  
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      10/08/2019  
Date

19 OCT - 8 PM 03  
DIVISION OF CORPORATIONS