

P20000023726

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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****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

FLORIDA PROFIT/NON PROFIT CORPORATION

M.YANES MD PA

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

Please File this one

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be: M. Yanes LTD PA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/ mailing address is:

Principal street address	Mailing address, if different is:
<u>3279 SW 139 PL</u>	<u>Same</u>
<u>Miami FL 33175</u>	

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Providing services as Medical Doctor.

FILED
20 MAR 19 AM 9:16
SECRETARY
TALLAHASSEE

ARTICLE IV SHARES

The number of shares of stock is: 100 SHARES

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: <u>Maitene Yanes (P)</u>	Name and Title: _____
Address: <u>3279 SW 139 PL</u>	Address: _____
<u>Miami FL 33175</u>	
Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
Name and Title: _____	Name and Title: _____
Address: _____	Address: _____

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Mailene Yanes

Address: 3279 SW 139 PL
Miami FL 33175

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Mailene Yanes

Address: 3279 SW 139 PL
Miami FL 33175

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



Required Signature/Registered Agent

3/19/20

Date

I submit this document and affirm that the facts stated herein are true. I am aware that any 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.



Required Signature/Incorporator

3/19/20

Date