

**Electronic Articles of Incorporation  
For**

P20000056388  
FILED  
July 21, 2020  
Sec. Of State  
dlokeefe

FIRST COMMUNITY HEALTH MEDICAL CENTER, INC.

The undersigned incorporator, for the purpose of forming a Florida profit corporation, hereby adopts the following Articles of Incorporation:

**Article I**

The name of the corporation is:

FIRST COMMUNITY HEALTH MEDICAL CENTER, INC.

**Article II**

The principal place of business address:

4214 EMERALD VISTA  
LAKE WORTH, FL. 33461

The mailing address of the corporation is:

4214 EMERALD VISTA  
LAKE WORTH, FL. 33461

**Article III**

The purpose for which this corporation is organized is:

"MEDICAL OFFICE FOR INTERNAL  
MEDICINE" TO OPTIMIZE HEALTH  
AND WELL BEING OF INDIVIDUALS, THE COMMUNITY, AND  
THE POPULATION.

**Article IV**

The number of shares the corporation is authorized to issue is:

100

**Article V**

The name and Florida street address of the registered agent is:

MIREILLE VICTOR  
4214 EMERALD VISTA  
LAKE WORTH, FL. 33461

I certify that I am familiar with and accept the responsibilities of registered agent.

Registered Agent Signature: MIREILLE VICTOR

## Article VI

The name and address of the incorporator is:

MIREILLE VICTOR  
4214 EMERALD VISTA

LAKE WORTH, FL 33461

Electronic Signature of Incorporator: MIREILLE VICTOR

I am the incorporator submitting these Articles of Incorporation and affirm that the facts stated herein are true. I am aware that 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. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of this corporation and every year thereafter to maintain "active" status.

## Article VII

The initial officer(s) and/or director(s) of the corporation is/are:

Title: P  
MIREILLE VICTOR  
4214 EMERALD VIST  
LAKE WORTH, FL. 33461

Title: VP  
NATACHA ETIENNE  
1706 CARRIAGE BROOKE DR,  
WELLINGTON, FL. 33414