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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : I20000000019 Phone : (305)552-5973 Fax Number : (305)675-5944

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FLORIDA PROFIT/NON PROFIT CORPORATION CARING FOR MEDICAL CENTER CORP

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

Help

ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

£	ARTICLE I NAME: The name of the corporation is:
	Caring For Medical Center Corp
	ARTICLE II PRINCIPAL OFFICE:
	The principal street address and mailing address is:
225	5 Glades Road, Boca Raton, Florida, 334:31
ARTICLE III	SHARES: The number of shares of stock is:1,000
ARTIC	LE IV INITIAL DIRECTORS AND/OR OFFICERS:
	Geisel Ramos (P)
	
	INITIAL REGISTERED AGENT AND STREET ADDRESS:
The name and Fl	orida street address (PO Box not acceptable) of the registered agent is: Geisel Ramos
225	5 Glades Road, Boca Raton, Florida, 33431
ARTICLE VI	INCORPORATOR: The name and address of the Incorporator is: Geisel Ramos
225	5 Glades Road, Boca Raton, Florida, 33431
	<u> </u>

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 Bate

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.

8/20/2020 Incorporator Date