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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

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FLORIDA PROFIT/NON PROFIT CORPORATION
BRIGHT LIFE MEDICAL SERVICES INC

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

2020 AUG 25 PM 4:16
STATE OF FLORIDA
DIVISION OF CORPORATIONS
FILING SERVICES

ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

ARTICLE I NAME: The name of the corporation is:Bright Life Medical Services Inc**ARTICLE II PRINCIPAL OFFICE:**

The principal street address and mailing address is:

50 W 40 PL Hialeah
FL 33012**ARTICLE III SHARES:** The number of shares of stock is:100**ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:**Diana Teresa Jaime P

ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:

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

Diana Teresa Jaime
50 W 40 PL Hialeah FL
33012**ARTICLE VI INCORPORATOR:** The name and address of the Incorporator is:Diana Teresa Jaime
50 W 40 PL Hialeah FL 33012

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_____
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_____
Date