

P2000077759
Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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20 OCT -7

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To:
Division of Corporations
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Account Name : LAZARUS CORPORATE FILING SERVICE, INC.
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Email Address: _____

**FLORIDA PROFIT/NON PROFIT CORPORATION
MDO HEALTH SERVICE CORPORATION**

2020 OCT -7 PM 4:10

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:

MDO HEALTH SERVICE CORPORATION

ARTICLE II PRINCIPAL OFFICE:

The principal street address and mailing address is:

MDO Health Service Corporation

611 E 44 ST HIALEAH FL 33013

ARTICLE III SHARES: The number of shares of stock is: 100

ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:

MARIO CESAR SUAREZ GUERRA
(PRESIDENT)

20 OCT - 7 PM '20

ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:

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

MARIO CESAR SUAREZ GUERRA

611 E 44 ST

HIALEAH FL 33013

ARTICLE VI INCORPORATOR: The name and address of the Incorporator is:

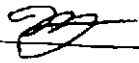
MARIO CESAR SUAREZ GUERRA

611 E 44 ST

HIALEAH FL 33013

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