## 12/82/2828 15: 42 3852281448 DODO AZARUS CUERATI 5 Florida Department of State

## Division of Corporations Electronic Filing Cover Sheet

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To:			
	Division of Corporations		
	Fax Number	: (850)617-6381	
From:			
	Account Name	: LAZARUS CORPORATE FILING SERVICE, INC.	
	Account Number	: I200000000019	r <u>~</u> >
	Phone	: (305)552-5973	2020
	Fax Number	: (305)675-5944	
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**Enter	the email addres	s for this business entity to be used for fu	ture <u>'</u> .
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## FLORIDA PROFIT/NON PROFIT CORPORATION U.C.M. HEALTH GROUP INC.

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Electronic Filing Menu

Corporate Filing Menu

Help

## ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

ARTICLE I NAME: The name of the corporation is:
U.C.M. Health Group INC.
ARTICLE II PRINCIPAL OFFICE:
The principal street address and mailing address is:
3500 sw 8 st Svit 256
Miani PL 33 144
ARTICLE III SHARES: The number of shares of stock is:
ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:
JUAN CARLOS ROYERO VALdes
ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:
The name and Florida street address (PO Box not acceptable) of the registered agent is:
Juan Carlos Royero Valdes
8500 Su 8 St Suit 256
Miami F1 33144
ARTICLE VI INCORPORATOR: The name and address of the Incorporator is:
Juan Carlos Royero Valdes
8500 SW 8 St Suit 256
Miami F1 33144

Having been named as registered agent to a corporation at the place designated in this c	ertificate. 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 father false information submitted in a docume third degree felony as provided for in s.817.1	nt to the Department of State constitutes a
(Incorporator	Date