

12/17/2020

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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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FLORIDA PROFIT/NON PROFIT CORPORATION
MG Healthcare Holdings Inc

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$70.00

2020 DEC 17 AM 11:02

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SLK
12/18/20

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Corporate Filing Menu

Help

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAMEThe name of the corporation shall be: MG HEALTHCARE HOLDINGS INC**ARTICLE II PRINCIPAL OFFICE**Principal street address

Mailing address, if different is:

13301 SW 132 AVE STE 205Miami, FL 33186**ARTICLE III PURPOSE**The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS**ARTICLE IV SHARES**The number of shares of stock is: 1,000**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: Pedro Domenech - Pres Name and Title: _____Address: 13301 SW 132 AVE Address: _____Suite 205Miami FL 33186Name and Title: Livia M. Gomez - VP Name and Title: _____Address: 13301 SW 132 AVE Address: _____Suite 205Miami FL 33186

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____
Address: _____ Address: _____

ARTICLE VI REGISTERED AGENTThe name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Pedro Domenech
Address: 13301 SW 132 AVE STE 205
Miami FL 33186

ARTICLE VII INCORPORATORThe name and address of the Incorporator is:

Name: Pedro Domenech
Address: 13301 SW 132 AVE STE 205
Miami FL 33186

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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.



Required Signature/Registered Agent

12/16/2020

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.



Required Signature/Incorporator

12/16/2020

Date