

PA1000000637

Florida Department of State Division of Corporations Electronic Filing Cover Sheet

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To: Division of Corporations
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From: Account Name : LAZARUS CORPORATE FILING SERVICE, INC.
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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.****

Email Address: _____

FLORIDA PROFIT/NON PROFIT CORPORATION B&M HEALTH SOLUTIONS, INC

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

JLC
1/6/21

2021 JAN -5 PM 4:22
2021 JAN -5 PM 12:09

ARTICLES OF INCORPORATION
In compliance with Chapter 607 (Profit)

ARTICLE I NAME: The name of the corporation is:

B & M Health Solutions, Inc.

ARTICLE II PRINCIPAL OFFICE:

The principal street address and mailing address is:

330 SW 27 Avenue
Miami, Florida 33125
Suite 406

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

ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:

Rolando Matos (P)

ALL INFORMATION CONTAINED HEREIN IS UNCLASSIFIED

2021 JAN -5 PM 4:22

ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:

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

Rolando Matos
330 SW 27 Avenue
Miami, Florida 33125, Suite 406

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

Rolando Matos
330 SW 27 Avenue
Miami, Florida 33125, Suite 406

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

R. Reed
Registered Agent

12-29-20
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.

R. Reed
Incorporator

12-29-20
Date

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