

PA1000008401

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.****

Email Address: _____

FLORIDA PROFIT/NON PROFIT CORPORATION
RED ROAD CENTER OF SOUTH FLORIDA INC

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

Signature
2/5/21

ARTICLES OF INCORPORATION

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

ARTICLE 1 NAME

ARTICLE I NAME:
The name of the corporation shall be: Red Road Center of South Florida

ARTICLE II PRINCIPAL OFFICE

Principal ~~street~~ address.

Mailing address, if different, is:

INC

1350 SW 57 Ave #315
Miami FL 33144

1350 SW 57 Ave
Suite #315

Miami FL 33144

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Medical service

ARTICLE IV SHARES

ARTICLE IV. SHARES
The number of shares of stock is: 1000 shares of \$1.00

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: SONIA M Chaviano

Name and Title:

Address

President

Address:

1350 NW 57 Ave
#315 Miami FL 33144

Name and Title:

Name and Title:

Address

Address:

Name and Title:

Name and Title:

Address

Address:

2021 FEB -4 AM 9:52Z
HALLMASTER T1000

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

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: SONIA M CHAVIANO
Address: 1350 SW 57 AVE #315
Miami FL 33144

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: SONIA M CHAVIANO
Address: 1350 SW 57 AVE #315
Miami FL 33144

FILED
FEB 4 2021
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TALLAHASSEE, FLORIDA

FILED

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 02/01/2021 (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

[Signature]
Required Signature/Registered Agent

02/01/2021
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.

[Signature]
Required Signature/Incorporator

02/01/2021
Date