

P21000014587

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.
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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
ALL MEDICAL CENTER CORP**

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

J. FASON

FEB 18 2021

2021 FEB 17 AM 9:28

2021 FEB 17 PM 2:29

ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

ARTICLE I NAME: The name of the corporation is:

ALL Medical Center CORP

ARTICLE II PRINCIPAL OFFICE:

The principal street address and mailing address is:

15230 SW 307th RD

Homestead, FL 33033

ARTICLE III SHARES: The number of shares of stock is: 100**ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:**

Danay Espinosa Batista - President

2021 FEB 17 AM 9:28

ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:

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

Danay Espinosa Batista

15230 SW 307th RD

Homestead, FL 33033

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

Danay Espinosa Batista

15230 SW 307th RD

Homestead, FL 33033

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

02/11/2021

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.



Incorporator

02/11/2021

Date

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