

Florida Department of State
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FLORIDA PROFIT/NON PROFIT CORPORATION
FIRST MEDICAL MANAGEMENT INC.

Certificate of Status	0
Certified Copy	1
Page Count	04
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RECEIVED
2021 MAR 11 PM 3:48
DIVISION OF CORPORATIONS
COMMERCIAL
REGISTRATION SERVICES

ARTICLES OF INCORPORATION

OF

FIRST MEDICAL MANAGEMENT INC.

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE : NAME

The name of the corporation shall be:

FIRST MEDICAL MANAGEMENT INC

ARTICLE II: PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

15731 PALMETTO CLUB DR MIAMI FL 33157

ARTICLE III: CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

100 SHARES OF \$5.00 EACH
(\$500.00)

ARTICLE IV: INITIAL REGISTERED AGENT & ADDRESS

The name and address of the initial registered agent is:

MARIA L GONZALEZ 15731 PALMETTO CLUB DR MIAMI FL 33157

ARTICLE V: INCORPORATOR(S)

The name(s) and address(es) of the incorporator(s) these Articles of Incorporation is (are):

MARIA L GONZALEZ 15731 PALMETTO CLUB DR MIAMI FL 33157

21 MAR 11 09:11:35

ARTICLE VI: DIRECTOR(S)

The name(s) and address of the director(s) in his corporation is (are):

MARIA L. GONZALEZ - PRESIDENT
15731 PALMETTO CLUB DR MIAMI FL 33157

The undersigned has (have) executed these Articles of Incorporation this 10 Days of March, 2021.



Signature/Title

Signature/Title

CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 607.325, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. The name of the corporation is:

FIRST MEDICAL MANAGEMENT INC.

2. The name and address of the registered agents and office is:

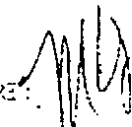
MARIA L GONZALEZ 15731 PALMETTO CLUB DR MIAMI FL 33157

SIGNED: 

TITLE: President

DATE: 3/10/21

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325, FLORIDA STATUTES.

SIGNATURE: 

DATE: 3/10/21

REGISTERED AGENT FILING FEE: \$20.00