

P21000037939

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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**FLORIDA PROFIT/NON PROFIT CORPORATION
CIFRAT MEDICAL CENTER CORP**

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

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2021 APR 27 AM 8:52

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TALLAHASSEE, FL

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TALLAHASSEE, FL

ARTICLES OF INCORPORATION

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

ARTICLE I NAME: The name of the corporation is:Cifrat Medical Center Corp**ARTICLE II PRINCIPAL OFFICE:**

The principal street address and mailing address is:

13499 Biscayne Blvd #105
North Miami FL 33181-2043**ARTICLE III SHARES:** The number of shares of stock is: 100**ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:**Geosvanis Cifrat Alonso (P)

FALLINGWATER, FL

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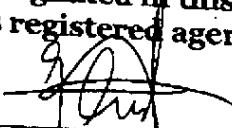
ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:

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

Geosvanis Cifrat Alonso
13499 Biscayne Blvd #105
North Miami FL 33181-2043**ARTICLE VI INCORPORATOR:** The name and address of the Incorporator is:Geosvanis Cifrat Alonso
13499 Biscayne Blvd #105
North Miami FL 33181-2043

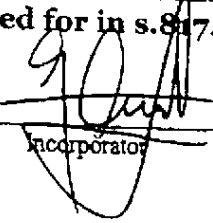
Required Signatures:

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_____
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_____
Date

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