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Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : I20000000019

: (305)552-5973

Phone

Fax Number

: (305)675-5944

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email	Address:	_					
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FLORIDA PROFIT/NON PROFIT CORPORATION MIAMI MEDICS GROUP, INC

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

Electronic Filing Menu

Corporate Filing Menu

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ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

ARTICLE 1 NAME: The name of the corporation is:

Miami Medics Group, Inc	
ARTICLE II PRINCIPAL OFFICE:	
The principal street address and mailing address is:	•
7000 W 12th AVE Suite 4 Hialeah FL 33014	
ARTICLE III SHARES: The number of shares of stock is: 100	
ARTICLE IV INITIAL DIRECTORS AND/OR OFFICE	CURS:
Yaima Bonet , President	20
Gleisy Vazquez, VP	21 SE
	3)
	<u> </u>
ARTICLE V INITIAL REGISTERED AGENT AND STREET The name and Florida street address (PO Box not acceptable) of the reg	
Yaima Bonet	
7000 W 12th Ave Suite 4	
Hialeah FL 33014	<u> </u>
ARTICLE VI INCORPORATOR: The name and address of the	Incorporator is:
Yaima Bonet	
7000 W 12th Ave Suite 4	<u> </u>
Hialeah FL 33014	

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

09/02/2021

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 ins. 817.185, F.S.

09/02/2021

Date

2021 SEP 13 AMII: 49
SECRETARY OF STATE
TALL ANY SECRETARY