

P21000079704

Division of Corporations

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 : FASTKIT CORP
Account Number : I20100000009
Phone : (305)599-0839
Fax Number : (305)592-9591

****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
QUALITY MED CENTER CORP**

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

Electronic Filing Menu

Corporate Filing Menu

Help

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

ARTICLE I NAME

The name of the corporation shall be: QUALITY MED CENTER CORP

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

5220 NW 72ND AVE BAY 11
MIAMI, FL. 33166

SAME

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY AND ALL LAWFUL BUSINESS

ARTICLE IV SHARES

1,000

The number of shares of stock is:

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: JOSE E CHAMI P/D

Name and Title: _____

Address 5220 NW 72ND AVE BAY 11

Address: _____

MIAMI, FL. 33166

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

6/1/21 11:00 AM

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: JULIO C MOLINA
Address: 8260 W FLAGLER STREET STE 2-C
MIAMI, FL. 33144

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: JULIO C MOLINA
Address: 8260 W FLAGLER STREET STE 2-C
MIAMI, FL. 33144

ARTICLE VIII EFFECTIVE DATE: 09/07/2021

Effective date, if other than the date of filing: _____ (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

Required Signature/Registered Agent 09/07/2021
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.

Required Signature/Incorporator 09/07/2021
Date