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To:

Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : 120000000019 Phone : (305)552-5973 Fax Number : (3<del>0</del>5)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	<b>:_</b>

## FLORIDA PROFIT/NON PROFIT CORPORATION SR COMFORT MEDICAL CENTER CORP

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

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

ARTICLE I NAME: The name of the corporation is:
SR Comfort Medical Center CORP.
ARTICLE II PRINCIPAL OFFICE:
The principal street address and mailing address is:
13701 SW 8881 OUT 1 305.
MIRMI FL 33186
ARTICLE III SHARES: The number of shares of stock is: 100
ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:
- Rolando Ayala Ricardo (P)
SI 20
SECRE
ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:
The name and Florida street address (PO Box not acceptable) of the registered agent is:
KOLANDO AYALA RICARDO
13701 SW 88 ST SUTE 305
MIAMI FL 33186
ARTICLE VI INCORPORATOR: The name and address of the Incorporator is:
ROLANDO AYALA RICARDO
13701 SW 88 ST SUITE 305
MIAMI FG 33186

## 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 familia: 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 6.817.155, F.S.

Incorporator

Date

2021 OCT 21 PH 12: 1