

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

P22000031240

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H22000149496 3)))



H220001494963ABC4

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.
Account Number : I20000000019
Phone : (305)552-5973
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: _____

22 APR 26 PM 9:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

FLORIDA PROFIT/NON PROFIT CORPORATION
JADE REHABILITATION CENTER CORP.

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

S. CHATHAM

APR 27 2022

RECEIVED
2022 APR 26 AM 8:10
DIVISION OF CORPORATIONS
COMMERCIAL
REGISTRATION SERVICES

ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

ARTICLE I NAME: The name of the corporation is:Jade Rehabilitation Center Corp.**ARTICLE II PRINCIPAL OFFICE:**

The principal street address and mailing address is:

13155 SW 134 ST Suite 221 AMiami, FL, 33186**ARTICLE III SHARES:** The number of shares of stock is: 100**ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:**Daimara Borroto Garcia (P)13155 SW 134 ST Suite 221 AMiami, FL, 3318622 APR 26 PM 9:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

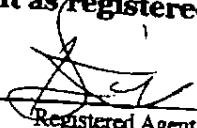
ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:

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

Daimara Borroto Garcia13155 SW 134 ST Suite 221 AMiami, FL, 33186**ARTICLE VI INCORPORATOR:** The name and address of the Incorporator is:Daimara Borroto Garcia13155 SW 134 ST Suite 221 AMiami, FL, 33186

Required Signatures:

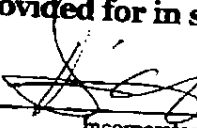
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Registered Agent04/25/22

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.



Incorporator04/25/22

Date

FILED
22 APR 26 PM 9:10
SECRETARY OF STATE
TALLAHASSEE, FL 32399