

# P22000052329

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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## FLORIDA PROFIT/NON PROFIT CORPORATION PINK ROSES MEDICAL CENTER INC

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 (Profit)

**ARTICLE I NAME:** The name of the corporation is:

PINK ROSES MEDICAL CENTER INC

**ARTICLE II PRINCIPAL OFFICE:**

The principal street address and mailing address is:

1850 SW 8TH ST MIAMI, STE 307 Miami, fl 33135

**ARTICLE III SHARES:** The number of shares of stock is: 100

**ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:**

EUGENIO ALCIDES HERNANDEZ (P)

1850 SW 8TH ST MIAMI, STE 307 Miami, fl 33135

**ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:**

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

EUGENIO ALCIDES HERNANDEZ

1850 SW 8TH ST MIAMI, STE 307 Miami, fl 33135

**ARTICLE VI INCORPORATOR:** The name and address of the Incorporator is:

EUGENIO ALCIDES HERNANDEZ

850 SW 8TH ST MIAMI, STE 307 Miami, fl 33135

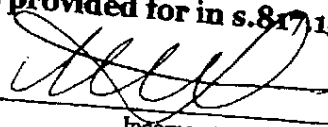
**Required Signatures:**

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

06/27/22  
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.

  
\_\_\_\_\_  
Incorporator

06/27/22  
Date

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