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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: |  |
|---------|----------|--|
|---------|----------|--|

## FLORIDA PROFIT/NON PROFIT CORPORATION CAD MED INVESTMENT, INC

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

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Corporate Filing Menu

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## ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

| <b>ARTICLE 1</b> NAME: The name of the corporation is:                                  |
|---|
| CAD MED INVESTMENT, INC   |
| ARTICLE II PRINCIPAL OFFICE:  |
| The principal street address and mailing address is:                                    |
| 317 King AVE KEY largo F1 3303;   |
| ARTICLE III SHARES; The number of shares of stock is:                                   |
|   |
| ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:   |
| MIGUEL Diaz LEZCano (P)   |
| <u> </u>  |
| · 1/9   |
|   |
| ·   |
|   |
|   |
| The name and Florida street address (PO Box not acceptable) of the registered agent is: |
| Miquel Diaz Cezcano   |
| 317 king Ave Key largo F1 33037   |
| <u> </u>  |
| ARTICLE VI INCORPORATOR: The name and address of the Incorporator is:                   |
| Miauel Diaz Lezcano   |
| 317 king Ave Key largo F1 38037   |

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## **Required Signatures:**

| Having been named as registered agent to accept service of corporation at the place designated in this certificate, I am appointment as registered agent and agree to accept service of the corporation at the place designated in this certificate, I am appointment as registered agent and agree to accept service of the corporation at the place designated in this certificate, I am appointment as registered agent to accept service of the corporation at the place designated in this certificate, I am appointment as registered agent to accept service of the corporation at the place designated in this certificate, I am appointment as registered agent and agree to accept service of the corporation at the place designated in this certificate. | familiar with a  | nd acce       |      |
|--|------------------|---------------|------|
|  |                  |               |      |
| Registered Agent   | Date             | <del></del>   |      |
| I submit this document and affirm that the facts stated herei  | n are true. I am | n aware       | that |
| I submit this document and affirm that the facts stated hereing<br>the false information submitted in a document to the Depart<br>third degree felony as provided for in s.817.155, F.S.   |                  |               |      |
| the false information submitted in a document to the Depart  |                  |               |      |
| the false information submitted in a document to the Depart  |                  |               |      |
| the false information submitted in a document to the Depart<br>third degree felony as provided for in s.817.155, F.S.  | ment of State c  | onstitut<br>2 |      |