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Plane operation of State 7729 Electronic Filing Cover Sheet

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To:	Division of Corporations Fax Number : (850)617-6381
From:	. (830/01/-0381
	Account Name : LAZARUS CORPORATE FILING SERVICE, INC. Account Number : I20000000019 Phone : (305)552-5973
	Phone : (305)552-5973 Fax Number : (305)675-5944
**	nter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.**
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) <u>}~</u>	FLORIDA PROFIT/NON PROFIT CORPORATION
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Page Count	03
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Electronic Filing Menu

Corporate Filing Menu

Help



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

te name of the corporation sha	Il be: 64 574v0	G. 1200	MD F	1
RTICLE II PRINCIPA	LOFFICE al street address USE DRIVE		Mailing address,	
RTICLE III PURPOSE c purpose for which the corpo BILLING	Pration is organized is:{E	Practice of	<u>USEDICIN</u>	E fr
number of shares of stock is:		ORS .		(5 m, Z
Name and Title: 74	100 FICERS AND/OR DIRECT STAVE (7 LEON 8/ MILLER DALVE (AN) FL. 3315	Name and Title:_ Address:		. 2: 09
Name and Title: Name and Title:	FICERS AND/OR DIRECT STAVE (7 (-eon 8/ Miller DA/18	Name and Title:		

(conti.) 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: Address: ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Name: Address: 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 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.