

Florida Department of the
Division of Corporations
Electronic Filing Cover Sheet

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

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FLORIDA PROFIT/NON PROFIT CORPORATION ONYX ADULT DAY CARE INC.

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

2ND REQUEST

FILED

2023 MAR 15 AM 12:44

STATE
FLORIDA
TALLAHASSEE, FL

2023.11.1

DS

ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

ARTICLE I NAME: The name of the corporation is:

Onyx Adult Day Care Inc.

ARTICLE II PRINCIPAL OFFICE:

The principal street address and mailing address is:

1621 N.W. 36 Street, Miami FL, 33142

ARTICLE III SHARES: The number of shares of stock is: 100**ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:**

President: Ortelio Rodriguez Torres

Vice President: Jessica Yarliza Pais Chu

CLERK OF STATE
TALLAHASSEE, FL

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ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:

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

Ortelio Rodriguez Torres

1621 N.W. 36 Street, Miami FL, 33142

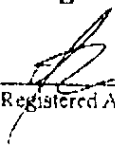
ARTICLE VI INCORPORATOR: The name and address of the Incorporator is:

Ortelio Rodriguez Torres

1621 N.W. 36 Street, Miami FL, 33142

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 Agent3/10/2023

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.



Incorporator3/10/2023

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