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Florida Department of State
Division of Corporations
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FLORIDA
DIVISION OF
CORPORATIONS

**FLORIDA PROFIT/NON PROFIT CORPORATION
STAR LAB AND DIAGNOSTIC INC**

Certificate of Status	0
Certified Copy	1
Page Count	03
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ALL INFORMATION CONTAINED
HEREIN IS UNCLASSIFIED

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Corporate Filing Menu

Help

D. O'KEEFE

APR 19 2023

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

ARTICLE I NAME

The name of the corporation shall be: STAR LAB AND DIAGNOSTIC INC

ARTICLE II PRINCIPAL OFFICE

Principal street address

123 NW 13TH ST SUITE 304-04
BOCA RATON FL 33432

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: MICKA P VALENTIN - Pres

Address: 123 NW 13TH ST
Suite 304-04
BOCA RATON FL 33432

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

2023 APR 18 PM 4:11
LAZARUS CORPORATION

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: MICKA P VALENTIN
Address: 123 NW 13TH ST SUITE 304-04
BOCA RATON FL 33432

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: MICKA P VALENTIN
Address: 123 NW 13TH ST SUITE 304-04
BOCA RATON FL 33432

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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.

[Signature]
Required Signature/Registered Agent

4/15/2023
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.

[Signature] 4/15/2023