

P23000060298
Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

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

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.
Account Number : I20000000019
Phone : (305)552-5973
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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
EXCELLENT MEDICAL SERVICES INC

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

RECEIVED

2023 AUG 16 PM 3:51

5 DIV.

2023 AUG 16 PM 3:24

ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

ARTICLE I NAME: The name of the corporation is:

Excellent Medical Services INC

ARTICLE II PRINCIPAL OFFICE:

The principal street address and mailing address is:

831 SW 65TH Ave

West Miami, FL 33144

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

ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:

Jorge Francisco Marrero (P)

Marilyn Vega Ferriol (VP)

ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:

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

JORGE FRANCISCO MARRERO

831 SW 65TH Ave, West Miami

FL 33144

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

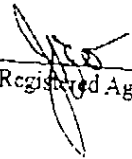
Jorge Francisco Marrero

831 SW 65TH Ave

West Miami, FL 33144

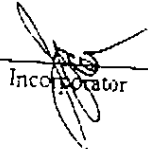
Required Signatures:

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_____
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_____
Date