

P24000020109

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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Division of Corporations  
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**FLORIDA PROFIT/NON PROFIT CORPORATION  
SANJONA MEDICAL CENTER INC**

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

Electronic Filing Menu

Corporate Filing Menu

Help

2024.11.21 PM 4:36

2024.11.21 PM 3:56

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: SANJONA MEDICAL CENTER INC

ARTICLE II PRINCIPAL OFFICE

Principal street address  
2828 S SEACREST BOULEVARD SUITE 104  
BOYNTON BEACH FL 33435

Mailing address, if different is:  
SAME AS PRINCIPAL

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: JOSEE SANZ

Name and Title: \_\_\_\_\_

Address 2828 S SEACREST BOULEVARD

Address: \_\_\_\_\_

SUITE 104

BOYNTON BEACH FL 33435

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address \_\_\_\_\_

Address: \_\_\_\_\_

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: JOSEE SANZ  
Address: 2828 S SEACREST BOULEVARD SUITE 104  
BOYNTON BEACH FL 33435

**ARTICLE VII INCORPORATOR**The name and address of the Incorporator is:

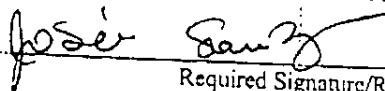
Name: JOSEE SANZ  
Address: 2828 S SEACREST BOULEVARD SUITE 104  
BOYNTON BEACH FL 33435

**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: 03/20/2024 (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*

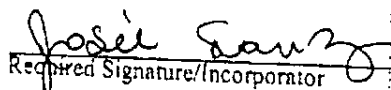


Required Signature/Registered Agent

03/20/2024

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.*



Required Signature/Incorporator

03/20/2024

Date

2024 F. ... PM 3:56