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Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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**FLORIDA PROFIT/NON PROFIT CORPORATION  
NORTH MEDICAL SERVICES, INC**

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

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## ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

### **ARTICLE I NAME:** The name of the corporation is:

North Medical Services, Inc

### **ARTICLE II PRINCIPAL OFFICE:**

The principal street address and mailing address is:

7600 W 20th AVE Suite 101-A

Hialeah FL 33016

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

### **ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:**

Yurima Bonet, President

### **ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:**

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

Yurima Bonet,

7600 W 20th AVE Suite 101-A

Hialeah FL 33016

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

Yurima Bonet 7600 W 20th AVE suite 101 A

Hialeah FL 33016

**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

07/03/2024

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.**



Incorporator

07/03/2024

Date