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Florida Department of State  
Division of Corporations  
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FLORIDA PROFIT/NON PROFIT CORPORATION

REYES MEDICAL CENTER GROUP INC.

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

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SECRETARY OF STATE  
TALLAHASSEE, FL

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Corporate Filing Menu

Help

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: REYES MEDICAL CENTER GROUP INC.

<u>ARTICLE II PRINCIPAL OFFICE</u>	
Principal street address	Mailing address, if different is:
111 NE 183rd STREET STE 106	111 NE 183rd STREET STE 106
MIAMI, FL 33169	MIAMI, FL 33169

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: SHARES: 100 @ \$1.00

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:	OSMANI RAMON REYES VARELA - P	Name and Title:	
Address	111 NE 183rd STREET STE 106	Address:	
	MIAMI, FL 33169		
Name and Title:		Name and Title:	
Address		Address:	
Name and Title:		Name and Title:	
Address		Address:	

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

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

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**ARTICLE VI REGISTERED AGENT**The **name and Florida street address** (P.O. Box NOT acceptable) of the registered agent is:Name: OSMANI RAMON REYES VARELAAddress: 111 NE 183rd STREET STE 106City: MIAMI, FL 33169**ARTICLE VII INCORPORATOR**The **name and address** of the Incorporator is:Name: OSMANI RAMON REYES VARELAAddress: 111 NE 183rd STREET STE 106MIAMI, FL 33169**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*  
Osmani (Oct 21, 2024 13:22 EDT)

Required Signature/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.*  
Osmani (Oct 21, 2024 13:22 EDT)

Required Signature/Incorporator

Date

2024

2024