

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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STATE OF FLORIDA
DIVISION OF CORPORATIONS
ELECTRONIC FILING

FLORIDA PROFIT/NON PROFIT CORPORATION
GOMEZ FAMILY MEDICAL GROUP INC

Certificate of Status	0
Certified Copy	1
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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: GOMEZ FAMILY MEDICAL GROUP INC

ARTICLE II PRINCIPAL OFFICE

Principal street address
7000 SW 62nd AVE PH-N
MIAMI, FL 33143

Mailing address, if different is:
7000 SW 62nd AVE PH-N
MIAMI, FL 33143

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: YAISEL GONZALEZ GOMEZ - P Name and Title:

Address 7000 SW 62nd AVE PH-N Address:
MIAMI, FL 33143

Name and Title: Name and Title:

Address Address:

Name and Title: Name and Title:

Address Address:

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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: YAISEL GONZALEZ GOMEZ
Address: 7000 SW 62nd AVE PH-N
MIAMI, FL 33143

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:


Name: YAISEL GONZALEZ GOMEZ
Address: 7000 SW 62nd AVE PH-N
MIAMI, FL 33143

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


Yaisel Gonzalez Gomez (Dec 19, 2024 16:24 EST)

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.


Yaisel Gonzalez Gomez (Dec 19, 2024 16:24 EST)
Required Signature/Incorporator

Date