

P95000008947

OFFICE USE ONLY (Document #)

LAZARUS CORPORATE INDUSTRIES, INC.

(Requestor's Name)

890 S.W. 87 AVENUE #16

(Address)

MIAMI, FLORIDA 33174 (305)552-5973

(City, State, Zip)

(Phone #)

LOCAL REPRESENTATIVE TALLAHASSEE

900001388459  
-02/06/95--01062--020  
\*\*\*122.50 \*\*\*122.50

OFFICE USE ONLY

(904)385-6735

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. Life Medical Center, Inc.  
(Corporation Name) (Document #)
2. \_\_\_\_\_  
(Corporation Name) (Document #)
3. \_\_\_\_\_  
(Corporation Name) (Document #)
4. \_\_\_\_\_  
(Corporation Name) (Document #)

☒ Walk in

☒ Pick up time 2:00

☒ Certified Copy

☐ Mail out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

| NEW FILINGS                         |                   |
|-------------------------------------|-------------------|
| <input checked="" type="checkbox"/> | Profit            |
| <input type="checkbox"/>            | NonProfit         |
| <input type="checkbox"/>            | Limited Liability |
| <input type="checkbox"/>            | Domestication     |
| <input type="checkbox"/>            | Other             |

| AMENDMENTS               |                                       |
|--------------------------|---------------------------------------|
| <input type="checkbox"/> | Amendment                             |
| <input type="checkbox"/> | Resignation of R.A., Officer/Director |
| <input type="checkbox"/> | Change of Registered Agent            |
| <input type="checkbox"/> | Dissolution/Withdrawal                |
| <input type="checkbox"/> | Merger                                |

| OTHER FILINGS            |                  |
|--------------------------|------------------|
| <input type="checkbox"/> | Annual Report    |
| <input type="checkbox"/> | Fictitious Name  |
| <input type="checkbox"/> | Name Reservation |

| REGISTRATION/<br>QUALIFICATION |                     |
|--------------------------------|---------------------|
| <input type="checkbox"/>       | Foreign             |
| <input type="checkbox"/>       | Limited Partnership |
| <input type="checkbox"/>       | Reinstatement       |
| <input type="checkbox"/>       | Trademark           |
| <input type="checkbox"/>       | Other               |

FILED  
95 FEB -2 PM 3:03  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

945-2078

*File with  
corp. sec. as per.*

*Dmc 2/2/95*  
Examiner's Initials



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham  
Secretary of State

January 27, 1995

LAZARUS

MIAMI, FL

SUBJECT: LIFE MEDICAL CENTER, INC.  
Ref. Number: W95000002018

We have received your document for LIFE MEDICAL CENTER, INC. and check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

CORPORATION CAN'T SERVE AS IT OWN INCORPORATOR (SEE ARTICLE VI).

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Simply adding "of Florida" or "Florida" to the end of an entity name **DOES NOT** constitute a difference. Please select a new name and make the substitution in all appropriate places. One or more words may be added to make the name distinguishable from the one presently on file.

When the document is resubmitted, please return a copy of this letter to ensure that your document is properly handled.

If you have any questions about the availability of a particular name, please call (904) 488-9000.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6934.

Loria Poole  
Corporate Specialist

Letter Number: 795A00003676

FILED

95 FEB -2 PM 3:03

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION  
OF

LIFE CLINIC CENTER, INC.

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida General Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

LIFE CLINIC CENTER, INC.

The principal place of business of this corporation shall be: 10801 SW 40TH STREET MIAMI, FL 33165

ARTICLE II NATURE OF BUSINESS

This corporation may engage in or transact any or all lawful activities or business permitted under the laws of the United States, the State of Florida, or any other state, country, territory or nation.

ARTICLE III CAPITAL STOCK

The aggregate number of shares of stock and its par value that this corporation is authorized to have outstanding at any one time is:

100 SHARES AT \$5.00 PAR VALUE

ARTICLE IV TERM OF EXISTENCE

This corporation is to exist perpetually.

ARTICLE V OFFICERS DIRECTORS

The name(s) and street address(es) of the initial officer(s) and director(s), if any, who shall hold office the first year of the corporation's existence or until their successor(s) is (are) elected, is(are):

JOSE RODRIGUEZ PRES./SEC.  
967 SW 75TH AVE  
MIAMI, FL 33144


ARTICLE VI INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to this articles of incorporation is(are):

JOSE RODRIGUEZ  
10801 SW 40TH STREET  
MIAMI, FL 33165

IN WITNESS WHEREOF, the undersigned incorporator(s) has(have) executed these Articles of Incorporation this 25th day of JANUARY, 1995.

Signature(s) of Incorporator(s)

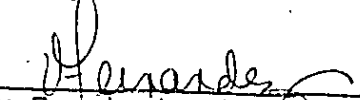
  
\_\_\_\_\_  
\_\_\_\_\_

STATE OF FLORIDA  
COUNTY OF DADE

THE FOREGOING instrument was acknowledged and sworn to before me this 25th day of JANUARY, 1995, by JOSE RODRIGUEZ  
(Name of Incorporator)

of LIFE CLINIC CENTER, INC.  
(Name of Corporation)

Notary Public

  
My Commission Expires 3/9/96

(SEAL)

CERTIFICATE DESIGNATING  
REGISTERED AGENT/REGISTERED OFFICE

FILED

95 FEB -2 PM 3:03

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Pursuant to the provisions of Section 607.325, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. The name of the corporation is: LIFE CLINIC CENTER, INC.
2. The name and address of the registered agent and office is:

\_\_\_\_\_  
JOSE RODRIGUEZ

\_\_\_\_\_  
10001 SW 40TH STREET  
(PO BOX NOT ACCEPTABLE)

\_\_\_\_\_  
MIAMI, FL 33165  
(CITY/STATE/ZIP CODE)

Signature \_\_\_\_\_  
(Corporate Officer)

Title \_\_\_\_\_ PRESIDENT

Date \_\_\_\_\_ JANUARY 25TH, 1995

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325 FLORIDA STATUTES.

Signature \_\_\_\_\_  
(Registered Agent)

Date \_\_\_\_\_ JANUARY 25TH, 1995

TO :  
DEPARTMENT OF STATE

FOR OFFICIAL USE  
DATE: 02/22/95 NUMBER: 204001436102

STATE OF FLORIDA  
OFFICE OF STATE TREASURER  
TALLAHASSEE FLORIDA

| FUND            | AMOUNT | REASON RETURNED    | KEY # |
|-----------------|--------|--------------------|-------|
| GENERAL REVENUE | 0.00   | INSUFFICIENT FUNDS | 1     |
| TRUST           | 698.75 | ACCOUNT CLOSED     | 2     |
| OTHER           |        | UNCOLLECTED FUNDS  | 3     |
| TOTAL           | 698.75 | OTHER              |       |

204001436102  
02/22/95  
\*\*\*\*137.50 \*\*\*\*137.50

| CROSS REF | SAMAS CODE                           | DISTRIBUTION | REASON | AMOUNT |
|-----------|--------------------------------------|--------------|--------|--------|
| 12        | 45-20-2-130001-45300000-00-000100-00 |              | 1      | 122.50 |
| 12        | 45-20-2-130001-45300000-00-000100-00 |              | 4      | 576.25 |

GRAND TOTAL: \$ 698.75  
=====

52723-A

RECEIVED  
FEB 20 AM 11:59  
FEDERAL RESERVE BANK

Process Date: 02/17/95

The above named fund(s) has been reduced by the amount of  
this check(s) under authority of Section 215.34, F.S.

State Treasurer

P9500000 8947

LAZARUS CORPORATE INDUSTRIES, INC.  
(Requestor's Name)

890 S.W. 87 AVENUE, SUITE: 16  
(Address)

MIAMI, FLORIDA 33174 (305)552-5973  
(City, State, Zip) (Phone #)

LOCAL REPRESENTATIVE TALLAHASSEE

(904)385-6715

800001585938  
-09/15/95--01003--015  
\*\*\*\*\*35.00 \*\*\*\*\*35.00

OFFICE USE ONLY

FILED  
95 SEP 19 PM 12:43  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. LIFE CLINIC CENTER INC.  
(Corporation Name) (Document #)
2. \_\_\_\_\_  
(Corporation Name) (Document #)
3. \_\_\_\_\_  
(Corporation Name) (Document #)
4. \_\_\_\_\_  
(Corporation Name) (Document #)

☒ Walk in ☒ Pick up time 2:00

☐ Certified Copy

☐ Mail out ☐ Will wait ☐ Photocopy

☐ Certificate of Status

RECEIVED  
95 SEP 15 PM 2:25  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

| NEW FILINGS                         |                   |
|-------------------------------------|-------------------|
| <input checked="" type="checkbox"/> | Profit            |
| <input type="checkbox"/>            | NonProfit         |
| <input type="checkbox"/>            | Limited Liability |
| <input type="checkbox"/>            | Domestication     |
| <input type="checkbox"/>            | Other             |

| AMENDMENTS               |                                       |
|--------------------------|---------------------------------------|
| <input type="checkbox"/> | Amendment                             |
| <input type="checkbox"/> | Resignation of R.A., Officer/Director |
| <input type="checkbox"/> | Change of Registered Agent            |
| <input type="checkbox"/> | Dissolution/Withdrawal                |
| <input type="checkbox"/> | Merger                                |

| OTHER FILINGS            |                  |
|--------------------------|------------------|
| <input type="checkbox"/> | Annual Report    |
| <input type="checkbox"/> | Fictitious Name  |
| <input type="checkbox"/> | Name Reservation |

| REGISTRATION/<br>QUALIFICATION |                     |
|--------------------------------|---------------------|
| <input type="checkbox"/>       | Foreign             |
| <input type="checkbox"/>       | Limited Partnership |
| <input type="checkbox"/>       | Reinstatement       |
| <input type="checkbox"/>       | Trademark           |
| <input type="checkbox"/>       | Other               |

Examiner's Initials

AMEND  
REG-19  
X00789, 00542,  
00672



RECEIVED

95 SEP 19 AM 11:23  
FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State

September 15, 1995

Lazarus Corporate Industries, Inc.  
890 S.W. 87 Avenue  
Suite 16  
Miami, FL 33174

SUBJECT: LIFE CLINIC CENTER, INC.  
Ref. Number: P95000008947

We have received your document for LIFE CLINIC CENTER, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The amendment must be signed by an incorporator if adopted by the incorporators or by a director if adopted by the directors.

If you have any questions concerning the filing of your document, please call (904) 487-6907.

Annette Hogan  
Corporate Specialist

Letter Number: 195A00042640



**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF INCORPORATION  
OF**

\_\_\_\_\_  
LIFE CLINIC CENTER, INC.  
\_\_\_\_\_  
(present name)

FILED  
95 SEP 19 PM 12:43  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*Pursuant to the provisions of section 607.1006, Florida Statutes, this corporation adopts the following articles of amendment to its articles of incorporation:*

**FIRST:** Amendment(s) adopted: (indicate article number(s) being amended, added or deleted)

SEE ATTACHED

**SECOND:** If an amendment provides for an exchange, reclassification or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself, are as follows:

**THIRD:** The date of each amendment's adoption: 9/13/95

**FOURTH:** Adoption of Amendment(s) (check one)

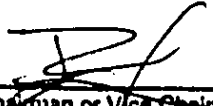
- ☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.
- ☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
- ☒ The amendment(s) was/were approved by the shareholders. The number of votes cast for the amendment(s) was/were sufficient for approval.
- ☐ The amendment(s) was/were approved by the shareholders through voting groups.

*[The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s).]*

The number of votes cast for the amendment(s) was/were sufficient for approval by \_\_\_\_\_  
(voting group)

(continued)

Signed this 13 day of September, 19, 95.

By   
(Chairman or Vice Chairman of the Board of Directors, President or  
other officer if adopted by the shareholders)  
OR  
(A director or incorporator if adopted by the directors or incorporators)

JOSE RODRIGUEZ

(Typed or printed name)

PRESIDENT/SECRETARY

(Title)

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS MY POSITION AS REGISTERED AGENT.

SIGNATURE 

DATE 9/13/95

ARTICLES OF AMENDMENT TO ARTICLES OF INCORPORATION OF:

Life Clinic Center, Inc.

AMENDMENT(S) ADOPTED:

Article V - Directors

Delete Old President/Secretary : Jose Rodriguez  
965 S.W. 75th Avenue  
Miami, Florida 33144

Add New President/Secretary : Elena del Valle  
2221 S.W. 136th Ct.  
Miami, Florida 33175

Registered Agent:

Delete Old Registered Agent: Jose Rodriguez  
10801 S.W. 40th Street  
Miami, Florida 33165

Add New Registered Agent: Elena del Valle  
10801 S.W. 40th Street  
Miami, Florida 33165



**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF INCORPORATION  
OF**

LIFE CLINIC CENTER, INC.

(present name)

**FILED**  
96 JAN 31 AM 10:10  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*Pursuant to the provisions of section 607.1006, Florida Statutes, this corporation adopts the following articles of amendment to its articles of incorporation:*

**FIRST:** Amendment(s) adopted: (indicate article number(s) being amended, added or deleted)

( SEE ATTACHMENT )

**SECOND:** If an amendment provides for an exchange, reclassification or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself, are as follows:

**THIRD:** The date of each amendment's adoption: 01 / 29 / 96

**FOURTH:** Adoption of Amendment(s) (check one)

- ☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.
- ☒ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
- ☐ The amendment(s) was/were approved by the shareholders. The number of votes cast for the amendment(s) was/were sufficient for approval.
- ☐ The amendment(s) was/were approved by the shareholders through voting groups.

*[The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s).]*

The number of votes cast for the amendment(s) was/were sufficient for approval by \_\_\_\_\_  
(voting group)

(continued)

ARTICLE OF AMENDMENT TO ARTICLES OF INCORPORATION  
FOR:

LIFE CLINIC CENTER INC

ADMENDMENT (S) ADOPTED:

ARTICLE IV: REGISTERED AGENT

THE NAME AND THE ADRESSES OF THE NEW REGISTERED AGENT  
HAS TO BE AMENMENT AS FOLLOW:

A) DELETE OLD REGISTERED AGENT: ELENA DEL VALLE  
10801 SW 40 ST  
MIAMI FL 33165

B) ADD NEW REGISTERED AGENT: ALBERTO ERNESTO  
10801 SW 40 ST  
MIAMI FL 33165

ARTICLE V: INCORPORATORS / *Directors*

THE NAME AND ADDRESS OF THE NEW PRESIDENT SHALL BE:

ALBERTO ERNESTO ZALDIVAR - ADD NEW PRESIDENT  
10801 SW 40 ST  
MIAMI FL 33165

ELENA DEL VALLE - DELETE OLD PRESIDENT  
10801 S.W. 40 STREET  
MIAMI, FLORIDA 33165

Signed this 29 day of JANUARY, 19, 96.

By Elena Del Valle  
(Chairman or Vice Chairman of the Board of Directors, President or  
other officer if adopted by the shareholders)  
OR  
(A director or incorporator if adopted by the directors or incorporators)

ELENA DEL VALLE

(Typed or printed name)

PRESIDENT - DIRECTOR

(Title)

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS MY POSITION AS REGISTERED AGENT.

SIGNATURE 

DATE 01 / 29 / 96