

P95000031803

FIELD STATIONS
SECRETARY OF CORPORATIONS
05 APR 24 PM 1:56

LAZARUS CORPORATE INDUSTRIES, INC.
(Requestor's Name)
890 S.W. 87 AVENUE, SUITE 116
(Address)
MIAMI, FLORIDA 33174 (305) 552-5973
(City, State, Zip) (Phone #)
LOCAL REPRESENTATIVE TALLAHASSEE
(904) 385-6735

OFFICE USE ONLY

900001466209
-04/27/95--01027--018
*****78.75 *****78.75

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

1. MENTAL MEDICAL SERVICES 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/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

W95-8652
509

05 APR 21 PM 11:11
RECEIVED

4-21
KAL



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

April 21, 1995

LAZARUS CORPORATE INDUSTRIES, INC.
890 S.W. 87TH AVENUE
SUITE 16
MIAMI, FL 33174

SUBJECT: MENTAL MEDICAL SERVICES INC
Ref. Number: W95000008652

We have received your document for MENTAL MEDICAL SERVICES INC and check(s) totaling \$78.75. However, your check(s) and document are being returned for the following:

The corporate name must be identical throughout the document.

If you have any questions concerning the filing of your document, please call (904) 487-6915.

Kevin Nickens
Document Specialist

Letter Number: 895A00019005

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 APR 24 PM 1:56

ARTICLES OF INCORPORATION

OF

MENTAL MEDICAL SERVICES 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: MENTAL MEDICAL SERVICES INC.

The principal place of business of this corporation shall be: 1421 SW 8 st suite 205
Miami FL 33135

ARTICLE II NATURE OF BUSINESS

This corporation may engage in or transact any or all lawfull 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-1.00 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 inical 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):

Maria Tereza Matta
1421 SW 8 st suite 205
Miami, FL 33135

President

ARTICLE VI INCORPORATOR(S)

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

Maria Teroza Matta

1421 SW 8 st suite 205
Miami FL 33135

IN WITNESS WHEREOF, the undersigned incorporator(s) has(have) executed these Articles of Incorporation this 12 day of April, 1995.

Signature(s) of Incorporator(s)

Maria Teroza Matta

STATE OF Florida
COUNTY OF Dade

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 APR 26 PM 1:56

CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE

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 Mental Medical Services Inc.

2 The name and address of the registered agent and office is

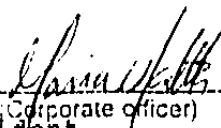
Maria Tereza Ma'ta

1421 SW 8 st Suite 205

(P O BOX NOT ACCEPTABLE)

Miami FL 33135

(CITY/STATE/ZIP)

SIGNATURE 

TITLE President

DATE 04/12/1995

HAVING BEEN NAMED TO ACCEPT SERVICE OR 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 

DATE 04/12/1995

REGISTERED AGENT FILING FEE