

P95000037393

MAY 08, 1995

DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
400 EAST GAINES STREET  
TALLAHASSEE, FLORIDA 32309

600001482716  
-05/10/95--01069--014  
\*\*\*\*367.50 \*\*\*\*122.50

DEAR MADAMS/SIRS:

HEREBY PLEASE FIND ENCLOSED DOCUMENTS TO FILE CORPORATIONS WITHIN THE  
STATE OF FLORIDA AND ALSO CHECK NO. 1677, IN THE AMOUNT OF: \$387.50 TO  
COVER THE FEES IN ORDER TO FILE THEM.

PLEASE BE SO KIND TO SEND PAPERS BACK TO MY ATTENTION, DUE TO THE FACT  
THAT I AM THEIR ACCOUNTANT AND THEY WANT ME TO HANDLE ALL THEIR AFFAIRS.  
MAIL IT TO THE FOLLOWING ADDRESS:

MILDRED A. CRUZ-NATAL  
P.O. BOX 590950  
MIAMI, FLORIDA 33159-0950

THANKING YOU IN ADVANCE FOR YOUR UNDERSTANDING AND COOPERATION  
REGARDING THE ABOVE MENTIONED, I REMAIN,

YOURS TRULY,

MILDRED A. CRUZ-NATAL

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

95 MAY 10 AM 11:44

cc:encl

ba 5/11

## **ARTICLES OF INCORPORATION**

**OF**

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

### **ARTICLE I NAME**

The name of the corporation shall be:

**JORCYN MEDICAL SERVICES, INC.**

### **ARTICLE II PRINCIPAL OFFICE**

The principal place of business and mailing address of this corporation shall be:

**6405 N.W. 36th STREET, SUITE 202G  
MIAMI SPRINGS, FLORIDA 33166**

### **ARTICLE III CAPITAL STOCK**

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

**100 SHARES @ \$1.00/PAR VALUE**

### **ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS**

The name and address of the initial registered

**JORGE L. CALERA  
6850 N.W. 173rd DRIVE, No. 110  
MIAMI, FLORIDA 33015**

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
MAY 10 AM 11:14

511 670

**ARTICLE V INCORPORATOR(S)**

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is (are):

**CYNTHIA M. LOPEZ  
3880 WEST 9th WAY  
HIALEAH, FLORIDA 33012**

**JORGE L. CALERA  
6880 N.W. 173rd DRIVE, No. 110  
MIAMI, FLORIDA 33015**

The undersigned has(have) executed these Articles of Incorporation this 1<sup>ST</sup> day  
of MAY, 19 95.

Cynthia M Lopez P/T  
Signature/Title

Jorge L. Calera VP/S  
Signature/Title

\_\_\_\_\_  
Signature/Title

FILED  
95 MAY 10 AM 11:11  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**CERTIFICATE OF DESIGNATION  
REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of sections 607.0501 or 617.0501, 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: \_\_\_\_\_

**JORCYN MEDICAL SERVICES, INC.**

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

**JORGE L. CALERA**

(NAME)

**6850 N.W. 173rd DRIVE, No. 110**

(P.O. BOX NOT ACCEPTABLE)  
**MIAMI, FLORIDA 33015**

(CITY/STATE/ZIP)

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE 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 OF MY POSITION AS REGISTERED AGENT.

SIGNATURE \_\_\_\_\_

DATE 5/1/95