

P95000039209

FILED

95 MAY 17 3 23

SECTION 1  
RELAY

LAZARUS CORPORATE INDUSTRIES, INC.  
(Requester'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

700001405157  
6/1/95 10:10 AM  
\*\*\*\*\*

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

1. DYNAMIC CARE, INC.  
(Corporation Name) (Document #)
2. \_\_\_\_\_  
(Corporation Name) (Document #)
3. \_\_\_\_\_  
(Corporation Name) (Document #)
4. \_\_\_\_\_  
(Corporation Name) (Document #)

☒ Walk in ☒ Pick up time 2:30

☐ Mail out ☐ Will wait ☐ Photocopy

☐ Certified Copy

☒ 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

W95-10398  
RECEIVED  
95 MAY 15 PM 1:22  
DIVISION OF CORPORATION

NANCY HENDRICKS, MAY 17 1995

Examiner's Initials



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham  
Secretary of State

May 16, 1995

LAZARUS

TALLAHASSEE, FL

SUBJECT: DYNAMIC CARE, INC.  
Ref. Number: W95000010398

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

The entity name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved entity. Names of administratively dissolved entities are not available for one year from the date of administrative dissolution unless the dissolved entity provides the Department of State with a notarized affidavit executed as required by section 607.0120, 617.01201, 608.5135 or 608.4482 Florida Statutes, permitting the immediate assumption or use of the name by another entity.

Simply adding "of Florida" or "Florida" to the end of a name does not constitute a difference.

When the document is resubmitted, please return a copy of this letter to ensure proper handling.

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) 487-6903.

Nancy Hendricks  
Corporate Specialist

Letter Number: 495A00025201

# ARTICLES OF INCORPORATION

OF  
DYNAMIC CARE OF MIAMI, INC.

*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:

DYNAMIC CARE OF MIAMI, INC.

## ARTICLE II PRINCIPAL OFFICE

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

15476 NW 77 Ct Ste 627  
Miami Lakes, FL 33016

## ARTICLE III SHARES

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

1000 Shares ( one dollar a share)

## ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

ADOLFO J. GONZALEZ  
15476 NW 77 CT Ste 627  
Miami Lakes, FL 33016

FILED  
65 MAY 17 1963  
CLERK OF DISTRICT COURT  
SOUTH DALLAS COUNTY TEXAS

ARTICLE V INCORPORATOR(S)

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

ADOLFO J. GONZALEZ  
15476 NW 77 CT Ste 627  
Miami Lakes, Fl 33016


ARTICLE VI DIRECTOR(S)

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

ADOLFO J. GONZALEZ  
15476 NW 77 Ct Ste 627  
Miami Lakes, Fl 33016

The undersigned Incorporator(s) has(have) executed these Articles of Incorporation this

15 day of May, 19 95.

  
\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

**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: DYNAMIC CARE OF MIAMI, INC.

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

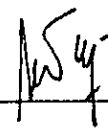
ADOLFO J. GONZALEZ  
(NAME)

15476 NW 77 CT Ste 627  
(P.O. BOX NOT ACCEPTABLE)

Miami Lakes, Fl 33016  
(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 May 15, 1995