

P95000072345

Logans Corp. Ind Inc
(Requestor's Name)
890 SW 87 Ave #16
(Address)
Miami FL (305) 552-5972
(City, State, Zip) (Phone #)

500001588155
-09/19/95--01052--033
****122.50 ****122.50

OFFICE USE ONLY

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

1. SUNSHINE HEALTH MANAGEMENT CORPORATION
(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	
☒	Profit
☐	NonProfit
☐	Limited Liability
☐	Domestication
☐	Other

AMENDMENTS	
☐	Amendment
☐	Resignation of R.A., Officer/Director
☐	Change of Registered Agent
☐	Dissolution/Withdrawal
☐	Merger

OTHER FILINGS	
☐	Annual Report
☐	Fictitious Name
☐	Name Reservation

REGISTRATION/ QUALIFICATION	
☐	Foreign
☐	Limited Partnership
☐	Reinstatement
☐	Trademark
☐	Other

RECEIVED
SEP 19 2 14 PM '95
FILED
95 SEP 19 PM 2:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Dmc 9/19/95

Examiner's Initials

ARTICLES OF INCORPORATION

FILED

95 SEP 19 PM 2:33

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

Sunshine Health Management Corporation

ARTICLE II PRINCIPAL OFFICE

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

*3890 West Flagler St.
Miami, FL 33134*

ARTICLE III SHARES

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

100 (one hundred)

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

*Lourdes Menendez
3890 West Flagler St.
Miami, Fla 33134*

ARTICLE V INCORPORATOR(S)

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

Lourdes Menendez (PRESIDENT)
3870 West Flagler St
Miami, Florida 33134

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

14 day of September, 1995.

x Lourdes Menendez
Signature

Signature

Signature

**Articles of Incorporation
Filing Fee - \$35**

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

FILED

95 SEP 19 PM 2:33

Pursuant to the provisions of sections 607.0501 or 617.0501, Florida, 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: Sunshine Health
Management Corporation

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

Lourdes Menendez
(NAME)
3870 West Flagler St.
(P.O. BOX NOT ACCEPTABLE)
Miami, Florida 33134
(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 Lourdes Menendez
DATE September 14, 1995