

P96000028536

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

SECRETARY OF STATE
-04/02/96--01037--003
****122.50 ****122.50

Office Use Only

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

1. VITAL THERAPY 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	
☒	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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
96 APR -2 PM 2:10

RECEIVED
96 APR -2 AM 11:19
DIVISION OF CORPORATIONS

9/4/2/96

ARTICLES OF INCORPORATION

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
96 APR -2 PM 2:10

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:

VITAL THERAPY CENTER, INC.

ARTICLE II PRINCIPAL OFFICE

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

261 S.W. 8th Street
MIAMI, FLA. 33130

ARTICLE III SHARES

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

100 SHARES, \$1.00 PER SHARE
VALUE

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

ADAMARIE PEREZ-CRESPO, LMT, NMT
1400 PENNSYLVANIA AVENUE, #3
MIAMI BEACH, FLA. 33139

ARTICLE V INCORPORATOR(S)

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

ADAMARIE PEREZ-CRESPO, LMT, NMT - PRESIDENT
1400 PENNSYLVANIA AVENUE #3 MIAMI BEACH, FL. 33139
LYNNE R. FALANGA, LMT - VICE PRESIDENT
1400 PENNSYLVANIA AVENUE #3 MIAMI BEACH, FL. 33139

ARTICLE VI DIRECTOR(S)

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

ADAMARIE PEREZ-CRESPO, LMT, NMT - PRESIDENT
1400 PENNSYLVANIA AVENUE #3 MIAMI BEACH, FL. 33139
LYNNE R. FALANGA, LMT - VICE PRESIDENT
1400 PENNSYLVANIA AVENUE #3 MIAMI BEACH, FL. 33139

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

20th day of MARCH, 19 96.



Signature

Signature

Signature

CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

96 APR -2 PM 2:10

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: VITAL THERAPY CENTER, INC.

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

ADAMARIE PEREZ-CRESPO, LMT, NMT
(NAME)

1400 PENNSYLVANIA AVENUE #3
(P.O. BOX NOT ACCEPTABLE)

MIAMI BEACH, FLA 33139
(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 03-20-96

P96000028536

I am writing to inform you that the address of Vital Therapy Center, Inc. document number, 12600-00000 has changed.

The new address is:

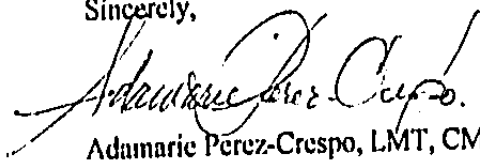
Vital Therapy Center, Inc.
600 Brickell Avenue
Suite 206-D
Miami, Florida 33131

Please make any necessary changes to your records.

Please feel free to call with any questions you may have: 305-373-3838.

Thank you for your attention to this matter.

Sincerely,



Adamarie Perez-Crespo, LMT, CMLDT
Owner/President

PLS-11