

P 97 0000 70392

Mitana Health Agency
4815 NW 183 St
Miami Florida 33053

City, State, Zip

Office Use Only

97 AUG 13 AM 11:24
FILED
TALLAHASSEE, FLORIDA

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

- 1. _____ (Corporation Name) _____ (Document #) 600002239276--9
-07/16/97--01050--001
*****50.00 *****50.00
- 2. _____ (Corporation Name) _____ (Document #)
- 3. _____ (Corporation Name) _____ (Document #) 600002239276--9
-07/16/97--01050--002
*****20.00 *****20.00
- 4. _____ (Corporation Name) _____ (Document #)

- Walk in
- Mail out
- Pick up time _____
- Will wait
- Certified Copy
- Photocopy
- Certificate of Status

NEW FILINGS	
<input 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

W-16544
W-16934
S 5 8
W-17545

897 36570

Examiner's Initials



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

July 17, 1997

MARIE M SAMEDY
4815 NW 183 STREET
MIAMI, FL 33055

SUBJECT: MHA ENTERPRISES, INC. DBA MITANA HEALTHCARE AGENCY
Ref. Number: W97000016544

FILED
97 AUG 13 AM 1:24
TALLAHASSEE, FLORIDA

We have received your document for MHA ENTERPRISES, INC. DBA MITANA HEALTHCARE AGENCY and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Corporations may file using only the corporate name. Please delete any reference to the "doing business as name" in your document. If you wish to register your fictitious name, you may do so by filing the enclosed application and submitting the appropriate fees to this office.

The registered agent must sign accepting the designation.

Please return the original and one copy of 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 (850) 487-6904.

Freida Chesser
Corporate Specialist

Letter Number: 897A00036570



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

July 23, 1997

MARIE M SAMEDY
4815 NW 183 STREET
MIAMI, FL 33055

SUBJECT: MHA ENTERPRISES, INC. DBA MITANA HEALTHCARE AGENCY
Ref. Number: W97000016934

We have received your document for MHA ENTERPRISES, INC. DBA MITANA HEALTHCARE AGENCY and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Corporations may file using only the corporate name. Please delete any reference to the "doing business as name" in your document. If you wish to register your fictitious name, you may do so by filing the enclosed application and submitting the appropriate fees to this office.

Please return the original and one copy of 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 (850) 487-6904.

Freida Chesser
Corporate Specialist

Letter Number: 397A00037259



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

July 30, 1997

MITANA HEALTH AGENCY
4815 NW 183 STREET
MIAMI, FL 33053

SUBJECT: MHA ENTERPRISES, INC. MITANA HEALTHCARE AGENCY
Ref. Number: W97000017545

FILED
97 AUG 13 AM 1:24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We have received your document for MHA ENTERPRISES, INC. MITANA HEALTHCARE AGENCY and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Corporations may file using only the corporate name. Please delete any reference to the "doing business as name" in your document. If you wish to register your fictitious name, you may do so by filing the enclosed application and submitting the appropriate fees to this office.

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with an address and telephone number where you can be reached during working hours.

Please return the original and one copy of 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 (850) 487-6904.

Freida Chesser
Corporate Specialist

Letter Number: 797A00038865

ARTICLES OF INCORPORATION

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

FILED
97 AUG 13 AM 1:24
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

MHA Enterprises, Inc.

ARTICLE II PRINCIPAL OFFICE

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

4815 N.W. 183rd St., Miami, FL. 33055;

ARTICLE III SHARES

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

100

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

Marie Micheline Samedy - 4815 N.W. 183rd Street, Miami, FL. 33055

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

Marie Micheline Samedy - 4815 N.W. 183rd Street, Miami, FL. 33055

M Samedy

Signature/Incorporator

06 - 11 - 97

Date

(An additional article must be added if an effective date is requested.)

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

M Samedy

Signature/Registered Agent

7/20/97

Date