

P97000071839

R. Levine

7540 Sw 95 PL

Mia FL 33173

Office Use Only

COF (S), & DOCUMENT NUMBER(S), (if known):

1. _____ (Corporation Name) (Document #)
2. Floral Park Health Center (Corporation Name) (Document #)
3. _____ (Corporation Name) (Document #)
4. _____ (Corporation Name) (Document #)

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97 AUG 19 PM 2:55
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<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

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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

9/19/97



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

July 28, 1997

R. LEVINE
7540 SW 95 PLACE
MIAMI, FL 33173

SUBJECT: FLORAL PARK HEALTH CENTER
Ref. Number: W97000017269

We have received your document for FLORAL PARK HEALTH CENTER and your check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The corporate name must contain a suffix that will clearly indicate that it is a corporation. Such suffixes include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

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 (850) 487-6933.

Dana Calloway
Document Specialist

Letter Number: 497A00037888

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TALLAHASSEE

ARTICLES OF INCORPORATION

FLORAL PARK Health Center, Inc

We, the undersigned, being of legal age, do hereby associate for the purpose of becoming a corporation under the laws of the State of Florida authorizing the formation of corporations.

ARTICLE I

The name of the corporation shall be FLORAL PARK Health Center
Inc.

ARTICLE II

The general nature of the business and the object and purposes proposed to be transacted and carried on are to be engaged in are any and all activities or business permitted under the laws of the United States and the State of Florida

ARTICLE III

The capital stock authorized, the par value thereof, and the characteristics of such stock shall be as follows. 100 shares at \$.01 par value.

ARTICLE IV

This corporation shall exist perpetually unless sooner dissolved according to the law and said corporation's existence shall commence on the date of subscription and acknowledgment of this Certificate of Incorporation.

ARTICLE V

The initial street address of said corporation shall be at
7540 SW 95 PL. Miami FL 33173

ARTICLE VI

The number of directors of this corporation shall not be less than one (1) nor more than seven (7). The corporation shall initially have two (2) Directors.

ARTICLE VII

The corporation shall be managed by a Board of Directors unless the stockholders shall by a majority vote hereafter determine that the corporation shall be managed by the stockholders. If the corporation is managed by Directors, the exact number of Directors shall be determined by the stockholders from time to time, but at no time shall there be less than one (1) director. At no time shall the corporation be managed by the stockholders unless there is at least one (1) stockholder.

ARTICLE VIII

Any restrictions imposed by the corporation on the sale or other disposition of its shares and on the transfer thereof must be noted conspicuously on each certificate representing shares to which the restriction applies.

ARTICLE IX

The name and addresses of the first Board of Directors of this corporation, who shall hold office for the first year or until their successors are elected shall be:

NAMES

ADDRESSES

OFFICE

Robert Levine

7540 SW 95 PL
MIAMI FL 33173

ARTICLE X

These Articles may be amended, when approved by a majority of the Directors and stockholders.

The corporation shall indemnify directors or officers, or subscribers and their heirs, and assigns, against all expenses, actually and necessarily incurred in connection with the defense or settlement of any claim action, suit or proceeding in which they be reason of being or having been directors or officers, except in relation to matters as to which any such directors or officer shall be adjudged to be liable for gross negligence or willful misconduct in the performance of duty. Such indemnification shall be in addition to any other rights to which the indemnification may be entitled under the law, or by-law, agreement, vote of stockholders, or otherwise.

The private property of the Stockholders shall not be subject to the payment of the corporate debts in any extent whatever.

ARTICLE XI INCORPORATOR

The name and street address of the incorporator to these Articles of Incorporation is ROBERT LEVINE
whose address is 7540 SW 95 PL, Miami FL 33173.

ARTICLE XII

The Registered Agent to accept service of process within this State for said corporation shall be: Robert Levine whose address is 7540 SW 95 PL, Miami FL 33173.

Having been named to accept service of process for the above stated corporation at the place designated, herein, I hereby accept to act in this capacity, and agree to comply with the provisions of said

Act to keeping open said office.

Robert Levine Robert Levine

Registered Agent

IN WITNESS WHEREOF, we, the undersigned, being the original subscribers to the capital stock hereinabove named and the incorporators, for the purpose of forming a corporation to do business both within and without the State of Florida, under the laws of Florida, do make and file this Certificate, hereby declaring and certifying that the facts herein stated are true and do respectively agree to take the number of shares hereinabove set forth, and hereunto set our hands and seals this 23 day of July, 1997.

Robert Levine Robert Levine

Incorporator

FLADL
L150770624550

STATE OF FLORIDA:
COUNTY OF DADE :

BEFORE ME the undersigned authority personally appeared, Robert Levine, Incorporator to me well known and known by me to be the individual described in, and who executed the foregoing Certificate of Incorporation, and who has acknowledged before me that he executed the same for the purposes therein expressed.

☒ personally known or
☐ produced _____ as identification

IN WITNESS WHEREOF, I have hereunto affixed my hand and official seal at Capital Bldg. Florida on this 23 day of July, 1997.

Consuelo Jerez
Notary Public, State of Florida



Consuelo Jerez
My Commission CC829815
Expires April 13, 2001

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