P98000003731

Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

500002397465--7
-01/12/98--01131--004
****131.25 ****131.25

SUBJECT: _WALKWAY, INC_

(Proposed corporate name - must include suffix)

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

☐ $70.00
Filing Fee

☐ $78.75
Filing Fee
& Certificate

☐ $122.50
Filing Fee
& Certified Copy

☑ $131.25
Filing Fee
Certified Copy
& Certificate

ADDITIONAL COPY REQUIRED

FILED
98 JAN 12 PM 2:37
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FROM: _Patrick Barry MD_

Name (Printed or typed)

7100 W. 20 Ave #411

Address

Hialeah   FL   33016

City, State & Zip

_305·825·9339_

Daytime Telephone number

NOTE: Please provide the original and one copy of the articles.

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.

ARTICLE I   NAME
The name of the corporation shall be:

WALKWAY , INC

ARTICLE II   PRINCIPAL OFFICE
The principal place of business and mailing address of this corporation shall be:

7100 W. 20 AVE
SUITE 411
HIALEAH FL 33016

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

500

ARTICLE IV   INITIAL REGISTERED AGENT AND STREET ADDRESS
The name and Florida street address of the initial registered agent are:

Patrick Barry MD
7100 W. 20 Ave #411
Hialeah FL 33016

ARTICLE V   INCORPORATOR
The **name and address** of the incorporator to these Articles of Incorporation are:

Patrick Barry, M.D.
7100 W. 20 Ave #411
Hialeah FL 33016

_____
Signature/Incorporator

1/7/98
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

_____
Signature/Registered Agent

1/7/98
Date