

TRANSMITTAL LETTER

PR000055736

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

SUBJECT: L.C. Comprehensive Care, P.A.
(Proposed corporate name - must include suffix)

900002551339--2
-06/08/98--01091--007
***122.50 ***122.50

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

FROM: Lyzsette L. Cardona, M.D.
Name (Printed or typed)

852 Crestview Ct.
Address

Weston, FL 33327
City, State & Zip

954-389-8055
Daytime Telephone number

FILED
98 JUN 20 AM 9:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

AUTHORIZATION BY PHONE TO
CORRECT
DATE
DOC. EXAM

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

Call @ 3:43
6/10/98 no answer
3

Handwritten signature and date 6/8/98



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham
Secretary of State

June 10, 1998

LYESETTE L CARDONA, M.D.
852 CRESTVIEW CL
WESTON, FL 33327

SUBJECT: L.C. COMPREHENSIVE CARE, P.A.
Ref. Number: W98000013379

We have received your document for L.C. COMPREHENSIVE CARE, P.A. 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 specific nature of business of the professional association must be stated in the document.

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) 487-6933.

Dana Calloway
Document Specialist

Letter Number: 798A00032655

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:

L.C. Comprehensive Care, P.A.

ARTICLE II PRINCIPAL OFFICE

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

1400 E. Oakland Park
Suite #109
Ft. Lauderdale, FL 33334

ARTICLE III SHARES

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

One thousand Shares of Common Stock

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Julio De Jesus
852 Crestview Cl.
Weston, FL 33327

ARTICLE V INCORPORATOR

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

Lysette L. Candona, M.D.
852 Crestview Cl.
Weston, FL 33327


Signature/Incorporator

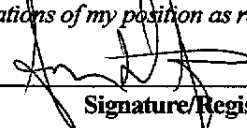
6/6/98

Date

Article VI Purpose or Nature of Business

To provide medical services and consultations in an office, Home
(An additional article must be added if an effective date is requested.)
and Hospital settings.

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

9/22/98

Date

FILED
98 JUN 20 AM 9:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA