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Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850)205-0381

From: Account Name : EMPIRE CORPORATE KIT COMPANY
Account Number : 072450003255
Phone : (305)634-3694
Fax Number : (305)633-9696

03 MAR 21 AM 8:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FLORIDA PROFIT CORPORATION OR P.A.

ESSENTIAL BLOOD WORKS OF FLORIDA, INC.

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$78.75

Handwritten initials/signature

2

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03 MAR 21 AM 11:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be: **ESSENTIAL BLOOD WORKS OF FLORIDA, INC.**

ARTICLE II PRINCIPAL OFFICE

The principle place of business and mailing address of this corporation shall be:
3575 NE 207 ST. Suite B-6A
Aventura, Florida 33180

ARTICLE III PURPOSE:

The purpose for which the corporation is organized is to transact any and all lawful business.

ARTICLE IV SHARES:

1000 (ONE THOUSAND SHARES)

ARTICLE V INITIAL DIRECTORS OFFICERS

The names and addresses:

President, Treasurer, and Secretary:
David Alan Black
3575 NE 207 St. Suite B-6A
Aventura, Florida 33180

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the registered agent is:

David Alan Black
3575 NE 207 St. Suite B-6A
Aventura, Florida 33180

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

David Alan Black
3575 NE 207 St. Suite B-6A ; Aventura, Florida 33180

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity.

David A Black
Signature/Registered Agent

3/20/03
Date

DAB
Signature/Incorporator

3/20/03
Date

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