

Florida Department of State

Division of Corporations Public Access System

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FOREIGN PROFIT/NONPROFIT CORPORATION

Adco Medical Inc.

Certificate of Status	0
Certified Copy	1
Page Count	03
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Electronic Filing Menu

Corporate Filing Menu

APRITE DHITE

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

Adco Medical	fnc.		
	orporation; must include "INCORPORATE top," "Inc," "Co," or "Corp.")	ED," "COMPANY," "CORPORATION,"	
		克· 三	-
(If name unavail	able in Florida, enter alternate corporate nat	me adopted for the purpose of transacting business in Flor	<u>(da)</u>
Nevada		3. 28-4811318	
	under the law of which it is incorporated)	(FEI number, if applicable)	5
06/27/200B		5. Perpetual	7
(Date	of incorporation)	(Duration: Year corp. will cease to exist or "parachas	<u>m</u> ==
Upon filing			6
		in Florida, if prior to registration) 7.1502, F.S., to determine penalty liability)	
346 Pike Roed,	Suite 1, West Palm Beach. FL 33411		
	(Principal office a	iddress)	
Same			
	(Current mailing a	nddress)	
Wholesale Med	dical Supplies		
(Purpose(s) of corporation authorized in home state or	country to be carried out in state of Florida)	
Name and stree	t address of Florida registered agent: (I	P.O. Box NOT acceptable)	
Name:	NRAI Services, Inc.	·	
fice Address:	2731 Executive Park Dr., Ste 4		
	Weston	33331	
	(City)	, Florida 33331 (Zip code)	
	\	,	
laving been nam esignated in this	application, I heraby accept the appoin	rvice of process for the above stated corporation at to ntment as registered agent and agree to act in this ca s relative to the proper and complete performance of	pacity.
d I am familiar	with and accept the obligations of my	position as registered agent.	•
N	IRAI Services, Inc.		
	1 way a suggest		
	(registered agent a signatul	re) Tanya Dietrich, Asst. Secretary	

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

FILED

12. Names and business addresses of officers and/or directors:	, ,	
A. DIRECTORS	2009 APR 14 A H: 3	
Chairman:	SECRETARY OF STATE	
Address:	TALLAHASSEE. FLORIE	
Vice Chairman:		
Address:		
Director. Minakshi Patel.		
2050 Dungat May Corner City, NR 90703		
Director:		
Address:		
B. OFFICERS President: WinakShi Patal Address: 2050 Russet Way, Carson City, NV 89703		
Vice President:		
Address:		
Secretary: Minakshi Petel		
Address: 2050 Russet Way, Carson City, NV 89703		
Treasurer: Minakshi Patei		
Address: 2050 Russet Way, Carson City, NV 89703		
NOTE: If necessary, you may attach an addendum to the application listing ad	ditional officers and/or directors.	
(Signature of Director or Officer listed in number 12 of the	ne application)	
14. Minakshi Patel, Secretary		
(Typed or printed name and capacity of person signing	application)	

SECRETARY OF STATE





CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, ROSS MILLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, ADCO MEDICAL INC., as a corporation duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since June 27, 2008, and is in good standing in this state.

Electronic Certificate
Certificate Number: C20090414-0391
You may verify this electronic certificate
online at http://www.nvsos.gov/

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on April 14, 2009.

ROSS MILLER Secretary of State