

PO8000071063

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

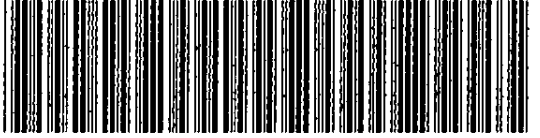
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE FLORIDA

08 JUL 29 PM 1:25

APPROVED  
AND  
FILED

B. McKnight JUL 29 2008

W08-31084

**COVER LETTER**

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

**SUBJECT:** TheraFlow, Inc.

**(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)**

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

\$70.00  
Filing Fee

\$78.75  
Filing Fee  
& Certificate of Status

\$78.75  
Filing Fee  
& Certified Copy

\$87.50  
Filing Fee,  
Certified Copy  
& Certificate of  
Status

**ADDITIONAL COPY REQUIRED**

**FROM:** Bryan Christopher Torres

Name (Printed or typed)

14444 SW 46 Terrace

Address

Miami, FL 33175

City, State & Zip

(305) 310-6735

Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

June 27, 2008

BRAYAN CHRISTOPHER TORRES  
14444 SW 46 TERRACE  
MIAMI, FL 33175

SUBJECT: THERAFLOW  
Ref. Number: W08000031084

We have received your document for THERAFLOW and your check(s) totaling \$87.50. 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.

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

Please return the corrected 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) 245-6931.

Becky McKnight  
Regulatory Specialist II  
New Filing Section

Letter Number: 008A00038769

**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:

TheraFlow, Inc.

**ARTICLE II PRINCIPAL OFFICE**

The principal street address and mailing address, if different is:

14444 SW 46 Terrace  
Miami, FL 33175-6834

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

To provide consumers with medical products.

**ARTICLE IV SHARES**

The number of shares of stock is:

100

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

List name(s), address(es) and specific title(s):

Bryan Christopher Torres, 14444 SW 46 Terrace Miami, FL 33175-6834, Chief Executive Officer (CEO)

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Law Offices of Eduardo A. Canal, 3971 SW 8th Street Suite 210 Miami, FL 33134, (305) 444-9068

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Bryan Christopher Torres, 14444 SW 46 Terrace Miami, FL 33175-6834

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

08 JUL 29 PM 1:21

APPROVED  
AND  
FILED

\*\*\*\*\*  
*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*

  
\_\_\_\_\_  
Signature/Registered Agent

7/21/08  
\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Signature/Incorporator

7/21/08  
\_\_\_\_\_  
Date