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

From: Account Name : EAS-T CORP. AGENTS, INC.
Account Number : 071001002335
Phone : (305)599-0839
Fax Number : (305)716-0346

02 JUN 13 PM 4: 31
SECRETARY OF STATE
TALLAHASSEE FLORIDA
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FLORIDA PROFIT CORPORATION OR P.A.

ACE MEDICAL SALVAGE INC.

Certificate of Status	0
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6/13

ARTICLES OF INCORPORATION
OF
ACE MEDICAL SALVAGE INC.

02 JUN 13 PM 4:31
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SECRETARY OF STATE
TALLAHASSEE FLORIDA

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida General Corporation Act, hereby adopt(s) the following Articles of incorporation.

ARTICLE I NAME

The name of the corporation shall be: ACE MEDICAL SALVAGE INC.

The principal place of business of this corporation shall be: 2435 NW 7th Street, Miami, Fl 33132.

ARTICLE II NATURE OF BUSINESS

This corporation may engage in or transact any or all lawful activities or business permitted under the laws of the United States, the State of Florida, or any other state, country, territory or nation.

ARTICLE III CAPITAL STOCK

The aggregate number of shares of stock and its value that this corporation is authorized to have outstanding at any one time is: 100 shares @ \$1.00 par value.

ARTICLE IV TERM OF EXISTENCE

This corporation is to exist perpetually.

ARTICLE V OFFICERS DIRECTORS

The name(s) and street address(es) of the initial officer(s) and director(s), if any, who shall hold office the first year of the corporation's existence or until their successor(s) is(are) elected, is(are):

ELBA MOR
2435 NW 7th street
Miami, Fl 33132.

ARTICLE VI INCORPORATOR(S)

The name(s) and street address(es) of the incorporator (s) to this articles of incorporation is(are):

ELBA MOR
2435 NW 7th Street
Miami, FL 33132.

IN WITNESS WHEREOF, the undersigned incorporator(s) has (have) executed these Articles of Incorporation this, June day of 12 ~~2001~~ 2002.

Signature(s) of Incorporator(s)

Elba Mor

CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 607.325, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. The name of the corporation:

ACE MEDICAL SALVAGE INC.

2. The name and address of the registered agent and office is:

ELBA MOR

2435 NW 7th Street

(P.O. BOX NOT ACCEPTABLE)

Miami, Fl 33132.

(CITY/STATE/ZIP)

SIGNATURE Elba Mor

TITLE _____

DATE 6-12-02

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325, FLORIDA STATUTES.

SECRET
TALLAMASSEE
02 JUN 2002

SIGNATURE Elba Mor

DATE 6-12-02