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11/4/98

TRANSMITTAL LETTER

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

100003424671--9  
-10/13/00--01074--012  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

SUBJECT: MED EX INC.  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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 of Status

☐ \$78.75 Filing Fee  
& Certified Copy  
☐ \$87.50 Filing Fee,  
Certified Copy  
& Certificate of  
Status  
**ADDITIONAL COPY REQUIRED**

FROM: Joseph Michael MASERATTI  
Name (Printed or typed)

10120 NW 43RD STREET  
Address

CORAL SPRINGS FL 33065  
City, State & Zip

(954) 752-2250 / (786) 348-7088  
Daytime Telephone number

FILED  
OCT 13 PM 2:44  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

10-16  
WC

# 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:

MED EX INC.

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

10120 NW 43RD STREET  
CORAL SPRINGS FL 33065

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TO BROKER/CONSULT MEDICAL SUPPLIES

## ARTICLE IV SHARES

The number of shares of stock is:

1000

## ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

JOSEPH MICHAEL MASERATTI  
10120 NW 43RD ST  
CORAL SPRINGS FL 33065

## ARTICLE VI REGISTERED AGENT

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


JOSEPH MICHAEL MASERATTI  
10120 NW 43RD STREET  
CORAL SPRINGS FL 33065

## ARTICLE VII INCORPORATOR


The name and address of the Incorporator is:

JOSEPH MICHAEL MASERATTI  
10120 NW 43RD STREET  
CORAL SPRINGS FL 33065

\*\*\*\*\*  
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

10-5-2000  
\_\_\_\_\_  
Date

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

10-5-2000  
\_\_\_\_\_  
Date

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