01 APR 19 AM 9: 20

SECRETARY OF STATE TALLAHASSEE FLORIDA

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

800004033988--1 -04/19/01--01117--001 \*\*\*\*\*70.00 \*\*\*\*\*\*70.00

SUBJECT:	LAB-TECH /	N/C_ ATE NAME – <u>MUST INCLI</u>	JDE SUFFIX)
	(		
Enclosed is an origin	al and one(I) copy of the artic	cles of incorporation and a	check for:
\$70.00 Filing Fee		□ \$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	□ \$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED
FROM: Name (Printed or typed)  160 LEGRAND AVEMUE  Address			
NoRTUVALT N-J 07647 City, State & Zip			7
	201- 7 Daytime	67-803) Telephone number	

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

## ARTICLES OF INCORPORATION

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

# FILED

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### ARTICLE I NAME

The name of the corporation shall be:

LAB-TECH INC.

#### <u>ART</u>ICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

10400 NW 33RD STREET MIAMI, FLORIDA, 33172

#### ARTICLE III *PURPOSE*

The purpose for which the corporation is organized is:

Distributor Laboratory Equipment and Supplies

#### ARTICLE IV SHARES

The number of shares of stock is:

100 SHARES

## ARTICLE V INITIAL OFFICERS DIRECTORS (optional)

The name(s) and address(es):

#### REGISTERED AGENT ARTICLE VI

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

MOISES ZURIARRAIN 6317 SOUTHWEST 15TH STREET MIAMI FLORIDA, 33144

#### *INCORPORATOR* ARTICLE VII

The name and address of the Incorporator is:

DANIEL PILDES

21 GRIST MILL LANE, UPPER SADDLE RIVER, NJ 07458

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

ature/Registered Agen

1/15/V00/ Date //18/0/

Signature/Incorporator