

## TRANSMITTAL LETTER

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

700004315347-0  
 -05/24/01-01067-019  
 \*\*\*\*\*87.50 \*\*\*\*\*87.50

**SUBJECT:** Nelbriz Medical Equipment, 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       \$78.75  
 Filing Fee      Filing Fee  
                     & Certificate of Status

\$78.75  
 Filing Fee  
                     & Certified Copy

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

**ADDITIONAL COPY REQUIRED**

**FROM:** Nelbriz Medical Equipment, Inc.  
 Name (Printed or typed)

19131 SW 121 AV  
 Address

Miami, FL 33177  
 City, State & Zip

(786) 5412-4417  
 Daytime Telephone number

01 MAY 24 PM 12:04  
 SECRETARY OF STATE  
 TALLAHASSEE FLORIDA

**FILED**

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

T. Burch JUN 1 2001

ARTICLES OF INCORPORATION  
OF  
NELBRIZ MEDICAL EQUIPMENT, INC.

The undersigned subscriber to these Articles of Incorporation a natural person competenet to contract hereby forms a corporation under the laws of the State of Florida.

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

01 MAY 24 PM 12: 04

FILED

ARTICLE I NAME

The name of the corporation shall be:

Nelbriz Medical Equipment, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

19131 SW 121 AV  
Miami, FL 33177

ARTICLE III PURPOSE

The purpose for which this corporation is organized is for the rental and sale of all medical equipments.

This corporation may engage or transact in 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 IV SHARES

The number of shares of stock is: 500

ARTICLE V INITIAL OFFICERS/DIRECTORS

The Board of Directors shall consist of 3 members. The number of Directors may be increased or decreased from time to time by vote of the Stockholders. The names and addressess of the Directors constituting the Board of Directors are:

Nelson J Perera President	19131 Sw 121AV Miami, FL 33177
Brizayas Perera Vice-President	760 E 8th Lane Hialeah, FL 33010
Brizays Perera Secretary	760 E 8th Lane Hialeah, FL 33010
Ledia Perera Treasurer	760 E 8th Lane Hialeah, FL 33010

ARTICLE VI REGISTERED AGENT

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

Nelson J Perera  
19131 SW 121 AV  
Miami, FL 33177

### ARTICLE VII INCORPORATOR

The name and street address of the person signing these Articles of Incorporation is:

Nelson J Perera 19131 SW 121AV Miami, FL 33177

### ACCEPTANCE OF REGISTERED AGENT

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.

Nelson Perera 5/18/01

Signature/Registered Agent

Date

Nelson Perera 5/18/01

Signature/Incorporate

Date

STATE OF FLORIDA

SS:

COUNTY OF DADE

The foregoing Articles of Incorporation of Nelbriz Medical Equipment, Inc. were acknowledged before me this 18<sup>th</sup> day of May, 2001.

Debra A. Recupero  
Notary Public  
State of Florida at Large

My commission expires:

