

PO1000057079

Florida Department of State
Division of Corporations
Public Access System
Katherine Harris, Secretary of State

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H01000072336 0)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

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

From:

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

FLORIDA PROFIT CORPORATION OR P.A.

BEST SERVICE MEDICAL EQUIPMENT, INC.

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

01 JUN -8 PM 1:56

FILED

B. McKnight JUN 08 2001

**ARTICLES OF INCORPORATION
OF
BEST SERVICE MEDICAL EQUIPMENT, INC.**

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:

BEST SERVICE MEDICAL EQUIPMENT, INC

The principal place of business of this corporation shall be:

5951 NW 151 ST. Suite #102
Miami Lakes, Fl. 33014

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 Common Stock / \$1.00 par value

ARTICLE IV TERM OF EXISTENCE

This corporation is to exist perpetually.

ARTICLE V OFFICERS AND 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):

YAMILE CLARO 5951 NW 151 St. Suite #102, MIAMI LAKES, FL 33014

FILED
01 JUN -8 PM 1:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE VI INCORPORATOR(S)

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

**YAMILE CLARO
5951 NW 151 ST. SUITE #102
MIAMI LAKES, FL. 33014**

IN WITNESS WHEREOF, the undersigned incorporator(s) has (have) executed these Articles of Incorporation this, 6th day of JUNE of the year 2001.

Signature(s) of Incorporator(s)



YAMILE CLARO

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:


BEST SERVICE MEDICAL EQUIPMENT, INC.
5951 NW 151 ST. SUITE #102
MIAMI LAKES, FL. 33014

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

YAMILE CLARO
5951 NW 151 ST. SUITE #102
MIAMI LAKES, FL. 33014

Signature 
Title PRESIDENT
Date 6/6/2001

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.

Signature 
Date 6/6/2001