

OFFICE USE ONLY (Document #)

EXPRESS CORPORATE FILING SERVICE INC.
(Requestor's Name)

1000 PONCE DE LEON BLVD. STE: 101
(Address)

CORAL GABLES, FL 33134 305-444-4994
(City, State, Zip) (Phone #)

OFFICE USE ONLY

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. Reliable Medical Deliveries INC
(Corporation Name) (Document #)

2. _____
(Corporation Name) (Document #)

3. _____
(Corporation Name) (Document #)

4. _____
(Corporation Name) (Document #)

500004598285--2
-08/19/01-01044-005
***227.50 ***78.75

- ☐ Walk in ☒ Pick up time _____ ☒ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS	
<input checked="" type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

FILED
01 SEP 19 PM 12:44
SECRETARY OF STATE
TALLAHASSEE FLORIDA

RECEIVED
SEP 19 11 11 AM '01
DIVISION OF CORPORATIONS
TALLAHASSEE FLORIDA

Examiner's Initials

ARTICLES OF INCORPORATION
FOR
RELIABLE MEDICAL DELIVERIES INC.

The undersigned incorporator, for the purpose of forming a corporation
under the Florida Business Corporation Act, hereby adopts the
following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

RELIABLE MEDICAL DELIVERIES INC.

FILED
01 SEP 19 PM 12:44
SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLE II PRINCIPAL OFFICE

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

20225 NW 52 CT.
MIAMI, FL 33055

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to
have shall be:

SHARES: 100

ARTICLE IV REGISTERED AGENT

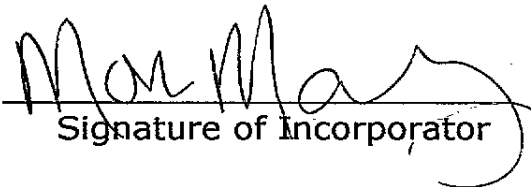
The name and Florida street address of the initial registered agent shall
be:

MONICA MARTINEZ
20225 NW 52 CT.
MIAMI, FL 33055

ARTICLE V INCORPORATOR

The name and address of the incorporator(s) to these Articles of Incorporation shall be:

MONICA MARTINEZ
20225 NW 52 CT.
MIAMI, FL 33055


Signature of Incorporator

9-18-01
Date

ARTICLE VI DIRECTOR(S)/OFFICER(S)

The name(s) and address(es) of the Director(s)/Officer(s) shall be:

MONICA MARTINEZ (P)
20225 NW 52 CT.
MIAMI, FL 33055

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in the articles, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.


Signature

9-18-01
Date

01 SEP 19 PM 12:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
FILED