

Florida Department of State

Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number : (850)205-0381

From:

Account Name : FAS-T CORP. AGENTS, INC.

Account Number : 071001002335

: (305)599-0839

Fax Number

: (305)716-0346

FLORIDA PROFIT CORPORATION OR P.A

NEW HOPE MEDICAL SUPPLY CORP.

Certificate of Status	0
Certified Copy	1
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ARTICLE OF INCORPORATION

OF

NEW HOPE MEDICAL SUPPLY CORP.

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: NEW HOPE MEDICAL SUPPLY CORP.

The principal place of business of this corporation shall be: 11860 SW. 5 ST. MIAMI,FL.33184

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 State, 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 par value that this corporation is authorized to have outstanding at any one time is:

 $100 \times $10.00 = $1,000.00$

ARTICLE IV TERM OF EXISTENCE

This corporation is to exist perpetually.

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SECRETARY OF STATE.

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ARTICLE V OFFICERS DIRECTORS

The name(s) and street address(es) of the initial officer(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):

JOSE M. NIEBLAS 11860 SW. 5 ST. MIAMI,FL.33184 DIRECTOR

ARTICLE VI INCORPORATOR (S)

The name(s) and street address(es) of the Incorporator(s) to these Article of Incorporation is (are):

JOSE M. NIEBLAS 11860 SW. 5 ST. MIAMI, FL. 33184

PRESIDENT, SECRETARY & TREASURER 100 shares

The undersigned has(have) executed these Article of Incorporation this __28 th_day of February ______,200_2____,

Signature/Title

Signature/Title

CERTIFICATE OF DESIGNATION REGISTERED OFFICE

Pursuant to the provisions of sections 607.0501 or 617.0501, 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 is:			
	NEW HOPE MEDICAL SUPPLY CORP.			
2.	The name and address of the registered agent and office			
	is JOSE M. NIEBLAS (Name)			
	11860 SW. 5 ST.			
	(F. O. BOX NOT ACCEPTABLE)			
	MIAMI, FLORIDA 33184			_
	(CITY/STATE/ZIP)			-
of 1 AS ! Thei Reli And	ING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DES REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FUR AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES ATING TO THE PROPER AND COMPLETE PERFORMACE OF MY DUTIES I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY ITION AS MY POSITION AS REGISTERED AGENT.	R	02	
	SIGNATURE H	X F	2 FEB 28	
	DATE 02-28-02 FLORID	of STATE	PM 3: 04	