

P020000027066

TRANSMITTAL LETTER

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

FILED
2002 MAR -5 PM 2:05
SECRETARY OF STATE
TALLAHASSEE FLORIDA

SUBJECT: Med Professional Services, 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
Filing Fee

☒ \$78.75
Filing Fee
& Certificate

☐ \$122.50
Filing Fee
& Certified Copy

☐ \$131.25
Filing Fee,
Certified Copy
& Certificate

ADDITIONAL COPY REQUIRED

FROM: Tania Rodriguez
Name (Printed or typed)

12360 SW 188 Terr
Address

Miami, FL 33177
City, State & Zip

786-246-4594
Daytime Telephone number

800005043958--9
-03/05/02--01055--002
*****78.15 *****78.15

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

3/12/02

ARTICLES OF INCORPORATION

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2002 MAR -5 PM 2: 05

SECRETARY OF STATE
TALLAHASSEE FLORIDA

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

ARTICLE I NAME

The name of the corporation shall be:

Med Professional Services, Inc.

ARTICLE II PRINCIPAL OFFICE

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

12360 SW 188 Terr
Miami, FL 33177

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

1000 Shares Common Stock NPV

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Tania Rodriguez
12360 SW 188 Terr
Miami, FL 33177

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

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

Tania Rodriguez, President, Treasurer, Secretary
12360 SW 188 Terr
Miami, FL 33177

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

08 day of February ~~xx~~ 19 2002

(An additional article must be added if an effective date is requested.)

X Tania Rodriguez
Signature

Signature

Signature

Notarization is not required

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, 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 Med Professional Services, Inc.

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

Tania Rodriguez

(NAME)

12360 SW 188 Terr

(P. O. Box or Mail Drop Box **NOT** ACCEPTABLE)

Miami, FL 33177

(CITY/STATE/ZIP)

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, 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.

X Tania Rodriguez
(SIGNATURE)

2/8/02
(DATE)