

TRANSMITTAL LETTER

PO2000086578

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

500006522685--9
-07/19/02--01024--006
*****87.50 *****87.50

SUBJECT: _____

Medico, Corp
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 of Status

☐ \$78.75
Filing Fee
& Certified Copy

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

ADDITIONAL COPY REQUIRED

FROM: _____

F Vietti / Vincenza MARcello
Name (Printed or typed)

2253 BLOUNT ROAD
Address

POMPANO BEACH FL 33069
City, State & Zip

561-716-0220
Daytime Telephone number

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

W02-21830
g 7/22

FILED
JUL-9 AM 8:11
TALLAHASSEE, FLORIDA
SECRETARY OF STATE



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

July 30, 2002

F. VIETTI/ VINCENZA MARCELLO
2253 BLOUNT RD.
POMPANO BEACH, FL 33069

SUBJECT: MEDICO, CORP.
Ref. Number: W02000021832

We have received your document for MEDICO, CORP. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6878.

Alan Crum
Document Specialist
New Filing Section

Letter Number: 202A00045829

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be: **E-MEDICO CORP**

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is: **2253 Blount Road
Pompano Beach, FL 33069**

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: **DISTRIBUTION of SUNDRY PRODUCTS**

ARTICLE IV SHARES

The number of shares of stock is:

1000

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

**VINCENZA MARCELLO
2253 Blount Road
Pompano Beach, FL - 33432**

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

02 AUG - 9 AM 8:11

FILED

ARTICLE VI REGISTERED AGENT

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

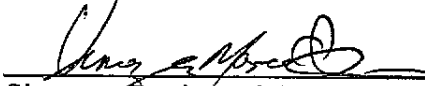
**VINCENZA MARCELLO
2253 Blount Road
Pompano Beach, FL 33432**

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

**VINCENZA MARCELLO
2253 Blount Road
Pompano Beach FL - 33432**

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


Signature Registered Agent

Date

7/15/04


Signature Incorporator

Date

7/15/04