

PO2000134607

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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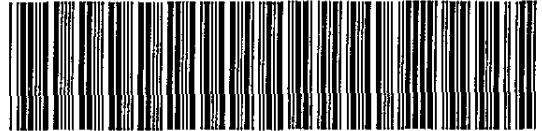
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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FILED  
02 DEC 23 PM 1:17  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

W02-34856

VK

12/27

**TRANSMITTAL LETTER**

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

**SUBJECT: RASHEL MEDICAL EQUIPMENT,CORP**

Enclosed are the original and one (1) copy of the articles of incorporation and a check for \$78.75.

**FROM:**

**Name: RASHEL MEDICAL EQUIPMENT,CORP**

**Address: 215 SW 17 AVE SUITE # 311**

**City: MIAMI**

**State: FL**

**Zip: 33135**

**Phone: 305-244-6849**

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**ARTICLES OF INCORPORATION**

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

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE I NAME**

The name of the corporation shall be:

**RASHEL MEDICAL EQUIPMENT CORP**

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

215 SW 17 AVE SUITE # 311

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Under the laws of the United States and the State of Florida

**ARTICLE IV SHARES**

The number of shares of stock is: 500

**ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)**

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

PRESIDENT: FRANCISCO OROPESA VICE-PRESIDENT: YULEXI PUJOL

215 SW 17 AVE STE 311

215 SW 17 AVE STE 311

MIAMI, FL 33135

MIAMI, FL 33135

**ARTICLE VI REGISTERED AGENT**

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

YULEXI PUJOL

215 SW 17 AVE STE 311

MIAMI, FL 33135

**ARTICLE VII INCORPORATOR**

The name and address of the incorporator is:

YULEXI PUJOL

215 SW 17 AVE STE 311

MIAMI, FL 33135

\*\*\*\*\*

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

12/17/02  
\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Signature/Incorporator

12/17/02  
\_\_\_\_\_  
Date