

P03000059983

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05 JUN -2 PM 4:34

SECRETARY OF STATE
TALLAHASSEE FLORIDA



900018570119

05/14/03--01019--006 **78.75

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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6003/4714

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TRANSMITTAL LETTER

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

SUBJECT: AM Solutions Corp.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are 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: Gustavo Ariza
Name (Printed or typed)

801 Brickell Bay Drive Suite 1961
Address

Miami FL 33131
City, State & Zip

305-533-5087
Daytime Telephone number

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



RECEIVED

03 JUN -2 PM 12:09

FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

May 22, 2003

GUSTAVO ARIZA
801 BRICKELL BAY DR STE 1961
MIAMI, FL 33131

SUBJECT: AM SOLUTIONS CORP.
Ref. Number: W03000014714

- ✓ We have received your document for AM SOLUTIONS CORP. and your check(s) totaling \$78.75. 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) 245-6933.

Dale White
Document Specialist
New Filings Section

Letter Number: 103A00032125

ARTICLES OF INCORPORATION

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

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03 JUN -2 PM 4:35

SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

Amed Solutions Corp.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

801 Brickell Bay Drive STE 1961 Miami, FL 33131

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Sell and distribute medical equipment and other relate 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):

ARTICLE VI REGISTERED AGENT

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

Gustavo Ariza
801 Brickell Bay Drive STE 1961
Miami FL 33131

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Gustavo Ariza
801 Brickell Bay Drive STE 1961
Miami FL 33131

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

Gustavo Ariza
Signature/Registered Agent

05-30-03
Date

Gustavo Ariza
Signature/Incorporator

05-30-03
Date