

**P03000098086**

Florida Department of State  
Division of Corporations  
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To: Division of Corporations  
Fax Number : (850)205-0381

From: Account Name : FAS-F CORP. AGENTS, INC.  
Account Number : 071001002335  
Phone : (305)599-0839  
Fax Number : (305)716-0346

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**FLORIDA PROFIT CORPORATION OR P.A.  
DOCURAPID CORP.**

Certificate of Status	0
Certified Copy	1
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Estimated Charge	\$78.75

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ARTICLES OF INCORPORATION  
FOR  
DOCURAPID CORP.

ARTICLE I

The name of the Corporation shall be:

DOCURAPID CORP.

ARTICLE II

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

6282 S.W. 44 ST.  
MIAMI, Florida 33155-5141

ARTICLE III

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

7500 SHARES

ARTICLE IV

The name and address of the initial registered agent is:

**JOSE I. BETANCOURT**  
**6282 S.W. 44 ST.**  
**MIAMI, FL 33155-5141**

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ARTICLE V

This corporation shall have officers and directors initially. The names and addresses of the initial officers and directors who shall hold office for the first year of the corporation, or until their successors are elected or appointed are:

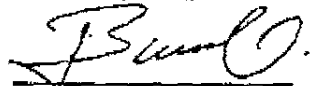
**JOSE I. BETANCOURT**  
**6282 S.W. 44 ST.**  
**MIAMI, FLORIDA 33155-5141**

ARTICLE VI

The name and street address of the incorporator to these Articles of Incorporation is:

**JOSE I. BETANCOURT**  
**6282 S.W. 44 ST.**  
**MIAMI, FLORIDA 33155-5141**

The undersigned has executed these Articles of Incorporation the 5<sup>th</sup> Day of September, 2003.

  
**JOSE I. BETANCOURT**

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

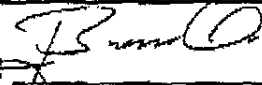
Pursuant to the provisions of Section 607.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office / registered agent, in the State of Florida.

1. The name of the Corporation is:

**DOCURAPID CORP.**

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

**JOSE L. BETANCOURT**  
**6282 S.W. 44 ST.**  
**MIAMI, FLORIDA 33155-5141**

SIGNATURE:   
TITLE: President  
DATE: September 5, 2003

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.

SIGNATURE:   
DATE: September 5, 2003

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