

P03000 111896

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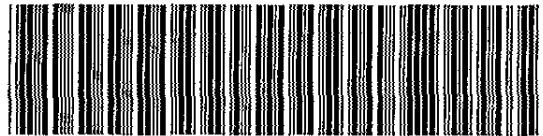
(Business Entity Name)

(Document Number)

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

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DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

03 OCT 10 PM 1:10

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OFFICE USE ONLY(DOCUMENT #)

**LAZARUS CORPORATE FILING SERVICE**

**3320 S.W. 87 AVENUE**

**MIAMI, FLORIDA (305)552-5973**

OFFICE USE ONLY

**CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):**

1. CHIRON MEDICAL, INC.  
(Corporation Name) (Document #)
2. \_\_\_\_\_  
(Corporation Name) (Document #)
3. \_\_\_\_\_  
(Corporation Name) (Document #)
4. \_\_\_\_\_  
(Corporation Name) (Document #)

☐ Walk in ☒ Pick up time \_\_\_\_\_

☐ Certified Copy

☐ Mail out ☐ Will wait

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☐ Certificate of Status

NEW FILINGS	
<input checked="" type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

Examiner's Initials

*Loria, please  
for Astrological  
purpose this  
corporation  
must be filed  
Friday Oct 10,  
2003 between  
9:30 to 10:30  
Am*

*C.R.*

**ARTICLES OF INCORPORATION**

*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:*

Chiron Medical, Inc.

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
03 OCT 10 AM 9:36

**ARTICLE II - PRINCIPAL OFFICE**

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

13431 SW 8 Lane  
Miami, FL 33184

**ARTICLE III - SHARES**

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

1000

**ARTICLE IV - INITIAL REGISTERED AGENT AND STREET ADDRESS**

*The name and address of the initial registered agent is:*

Maria C. Sobrado  
13431 SW 8 Lane  
Miami, FL 33184

**ARTICLE V - INCORPORATOR**

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

Maria C. Sobrado and Carlos M. Benitez  
13431 SW 8 Lane, Miami, FI 33184

***The undersigned incorporator has executed these Articles of Incorporation this*** 9 ***day of*** October ***20*** 03

M. Sobrado, MARIA SOBRADO  
*Signature*  
Carlos Benitez CARLOS Benitez  
SIGNATURE

**ARTICLE VI- DIRECTOR(S)**

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

Carlos M. Benitez, President  
13431 SW 8 Lane  
Miami, FI 33184  
Maria C. Sobrado, Vice President  
13431 SW 8 Lane  
Miami, FI 33184

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

***Having been named as Registered Agent and to accept service of process for the above stated corporation at 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 related to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as Registered Agent.***

M. Sobrado, reg. agent  
Registered Agent Signature

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