

Division of Corporations Public Access System

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To:

Division of Corporations

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Fax, Number : (850) 205-0381

Account Name : SILVA'S ENTERPRISE, INC.

Account Number : I20020000100

Phone : (305) 944-9755

: (305) 944-0955 Eax Number

## FLORIDA PROFIT CORPORATION OR P.A.

VASCULAR SOLUTIONS, INC.

| Certificate of Status | 0       |
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#### ARTICLES OF INCORPORATION

#### **OF**

#### VASCULAR SOLUTIONS, INC.

The undersigned incorporator(s), for the purpose of forming a Profit Corporation under Chapter 607 of the Florida Statutes, hereby adopt(s) the following Articles of Incorporation.

#### **ARTICLE I**

The name of this corporation shall be: VASCULAR SOLUTIONS, INC.

#### **ARTICLE II**

This corporation shall commence existence upon the date of filing with the Division of Corporations, State of Florida, and shall have perpetual existence.

#### **ARTICLE III**

The principal **place of business** of this corporation: 5979 NW 151 ST. Ste. 237, Miami Lakes, FL 33014.

The mailing address: 16300 NE 19 Ave. Suite C, N. Miami Beach FL 33162.

#### ARTICLE IV

The general nature of business of this corporation is to transact any and all lawful business.

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#### **ARTICLE V**

The aggregate number of shares which this corporation shall have authority to issue is 1.000 shares common stock having an individual par value of \$ 1.00. Unless otherwise stated in these articles, or in an amendment to these articles, there shall be only one (1) class of stock of this corporation.

#### ARTICLE VI

The name and street address of the initial Registered Agent of this corporation shall be: Marcos Matos

> 16300 NE 19 Ave. Ste. C North Miami Beach, FL 33162

### **ARTICLE VII**

The name and address of the officers and initial board of directors shall be:

Marcos Matos President / Director 8004 NW 154 Street Hialeah FL 33014

Loida Matos Vice-President/Director 8004 NW 154 Street Hialeah FL 33014

#### **ARTICLE VIII**

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

> Silva's Enterprise, Inc. 16300 NE 19 AVE. Suite C North Miami Beach, FL 33162

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The undersigned will execute these Articles of Incorporation the 12 day of January, 2004

INCORPORATOR
Fernando Silva Signing for
Silva's Enterprise, Inc.

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# CERTIFICATE OF DESIGNATION REGISTERED AGENT / REGISTERED OFFICE

VASCULAR SOLUTIONS, INC.
(Name of Corporation)

FILED

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HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THE ARTICLES OF INCORPORATION, 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

Registered Agent