

Division of Corporations Public Access System

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(((H040000718673)))

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To:

Division of Corporations

Fax Number : (850) 205-0381

From:

Account Name : FAS-T CORP. AGENTS, INC.

Account Number: 071001002335 Phone: (305)599-0839 Fax Number: (305)716-0346

FLORIDA PROFIT CORPORATION OR P.A.

RUSPIRATORY THERAPY ASSOCIATES OF MIAMI, INC.

Certificate of Status	0
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Page Count	01
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Electronic Filing Menu

Corporate Filing.

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2004 APR 14 AM 9: 14

TALLAHASSEE FLORIDA

FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

April 13, 2004

FAS-T

SUBJECT: RESPIRATORY THERAPY ASSOC. INC.

REF: W04000013513

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with a notarized affidavit stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

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Loria Poole Document Specialist New Filings Section FAX Aud. #: H04000071867 Letter Number: 204A00022751

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### ARTICLES OF INCORPORATION

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

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ARTICLE I NAME

The name of the corporation shall be:

TALLAHASSEE FLORIDA

RESPIRATORY THERAPY ASSOCIATES OF MIAMI, INC.

### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 7105 SW 8 ST

5ulte 302

Mami, FI 33144

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

As a profite Orginazation governed by the Articales of Incorpration and the Law in the State of Florida

### ARTICLE IV SHARES

The number of shares of stock is: 100 with a \$10.00 Per Value

### ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

Eddy Miranda (Director)

7105 SW 8 ST

Sulle 302

Mlami, FI 33144.

# ARTICLE VI REGISTERED AGENT

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

Eddy Miranda 7105 SW 8 ST

Suite 302 ;

Miami, FI 33144

#### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Eddy Miranda 7105 SW 8 ST

Mlami, Fl 33144

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 affiliate of the oppointment as registered agent and agree to act in this capacity.

igneture/Registered Agent

Signature/Incorporator

Date:

1-040

Date