P04000079646

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
Special histractions to Fining Officer.

Office Use Only



200035756262

Jun 18/19 -- 01031 -- 005 ** 78.75

DIVISION OF A P

Other

CR2E031(9/92)

Examiner's Initials

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:

ROXSU MEDICAL EquiPMENT Inc.

ARTICLE II - PRINCIPAL OFFICE

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

275 SW 17 Ave, Miami, FL Suite 318

ARTICLE III -SHARES

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

100

ARTICLES IV -INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

CARLOS Luis VERDECIA 5420 SW 116 AVE Miami, FL 33161

ARTICLE V - INCORPORATOR

Ine name and street address of the incorporator to t Incorporation is:	nese Articles of
CARLOS Luis VERDECEA	
5420 SW 116 Ave, Miami, Pl	33/61
The undersigned incorporator has executed these Ari Incorporation this 17 day of 1 May 201	ticles of 24
Signature	

ARTICLE VI- DIRECTOR(S)

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

CARLOS LUIS VERDECIA - PRESIDENT,

5420 SW 1/6 Ave

Miami, FL 33165

H 9: 56

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.

Registered Agent Signature