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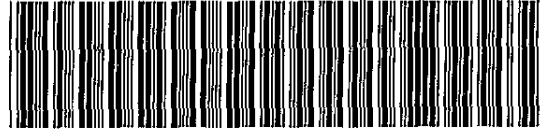
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**LAZARUS  
CORPORATE FILING SERVICE**

**3320 SW 87<sup>TH</sup> AVENUE**

**MIAMI, FL 33165 (305) 552-5973**

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

1. BEST SOLUTION MEDICAL SERVICES, CORP.  
(Corporation Name) (Document #)

2. \_\_\_\_\_  
(Corporation Name) (Document #)

3. \_\_\_\_\_  
(Corporation Name) (Document #)

4. \_\_\_\_\_  
(Corporation Name) (Document #)

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**NEW FILINGS**

- ☒ Profit  
☐ Not for Profit  
☐ Limited Liability  
☐ Domestication  
☐ Other

**AMENDMENTS**

- ☐ Amendment  
☐ Resignation of R.A., Officer/Director  
☐ Change of Registered Agent  
☐ Dissolution/Withdrawal  
☐ Merger

**OTHER FILINGS**

- ☐ Annual Report  
☐ Fictitious Name

**REGISTRATION/QUALIFICATION**

- ☐ Foreign  
☐ Limited Partnership  
☐ Reinstatement  
☐ Trademark  
☐ Other

**Examiner's Initials**



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood  
Secretary of State

June 20, 2005

LAZARUS

SUBJECT: BEST SOLUTION MEDICAL SERVICES, CORP.  
Ref. Number: W05000030190

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05 JUN 21 AM 10:52  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

We have received your document for BEST SOLUTION MEDICAL SERVICES, CORP. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

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

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6047.

Carolyn Lewis  
Document Specialist  
New Filings Section

Letter Number: 705A00042202

**ARTICLES OF INCORPORATION  
OF  
BEST SOLUTION MEDICAL SERVICES USA CORP.**

**ARTICLE I**

THE NAME OF THE CORPORATION IS:

BEST SOLUTION MEDICAL SERVICES USA CORP.

**ARTICLE II**

THE CORPORATION MAY ENGAGE IN ANY ACTIVITY OF BUSINESS PERMITTED UNDER THE LAWS OF THE UNITED STATES AND UNDER THE LAWS OF STATE OF FLORIDA.

**ARTICLE III**

THE MAXIMUN NUMBER OF SHARES OF CAPITAL STOCK THAT THE CORPORATION IS AUTHORIZED TO ISSUES IS 500 SHARES AT \$1.00 PER VALUE

**ARTICLE VI**

THE AMOUNT OF CAPITAL WITH WHICH THE CORPORATION WILL BEGIN BUSINESS IS THE SUM OF \$500.00

**ARTICLE V**

THE CORPORATION SHALL HAVE PERPETUAL EXISTENCE UNLESS SOONER DISSOLVED ACCORDING TO LAW, AND ITS EXISTENCE SHALL COMMNCE UPON FILING.

**ARTICLE VI**

THE STREET ADDRES IS THE PRINCIPAL OFFICE OF THE CORPORATION IN THIS STATE SHALL BE:

12805 S.W. 76 TERRACE MIAMI, FLORIDA 33183

**ARTICLE VII**

THE NAME (S) AND STREET ADDRESS (ES) OF THE PERSON SIGNING THESE ARTICLES ARE:

JOSEFA G. ABREU – 12805 S.W. 76 TERRACE MIAMI, FLORIDA 33183

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### ARTICLE VIII

THE CORPORATION SHALL HAVE A BOARD OF DIRECTORS CONSISTING OF NOT LESS THAN ONE OR MORE THAN SIX DIRECTORS. THE INITIAL BOARD OF DIRECTORS SHALL CONSIST OF ONE DIRECTORS WHOSE NAME AND ADDRESS ARE AS FOLLOWS:

JOSEFA G. ABREU - 12805 S.W. 76 TERRACE MIAMI, FLORIDA 33183

### ARTICLE IX

THE STREET ADDRESS OF INICIAL REGISTERED OFFICE AND THE NAME OF INICIAL REGISTERED AGENT AT THAT ADDRESS SHALL BE:

JOSEFA G. ABREU - 12805 S.W. 76 TERRACE MIAMI, FLORIDA 33183

THE UNDERSIGNED HAS (HAVE) EXECUTED THESE ARTICLES OF INCORPORATION THIS TEN DAY OF JUNE OF 2005

JOSEFA G. ABREU  
PRESIDENT

  
SIGNATURE

CERTIFICATE OF DESIGNATION

REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of sections 607.0501 or 617.0501, 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 :

BEST SOLUTION MEDICAL SERVICES, USA CORP.

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

JOSEFA G. ABREU - 12805 S.W. 76 TERRACE MIAMI, FLORIDA 33183

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 : JUNE 10, 2005

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05 JUN 17 PM 2:09  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA